



# **THE BOARD of SUPERVISORS**

## **First District**



**Gloria  
Molina**

## **Second District**



**Yvonne  
Brathwaite  
Burke**

## **Third District**



**Zev  
Yaroslavsky**

## **Fourth District**



**Don  
Knabe**

## **Fifth District**



**Michael D.  
Antonovich**

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1     **[NOTICE OF ADJOURNMENT OF THE JANUARY 28, 2003 MEETING OF THE**  
2                   **BOARD OF SUPERVISORS BEGINS ON PAGE 279]**

3  
4     **SUP. BURKE, CHAIR:** WE'D LIKE EVERYONE TO TAKE THEIR -- TO COME  
5     TOWARDS THEIR SEAT AND PLEASE STAND. THIS MORNING, PASTOR  
6     GERARD, PARDON ME, PASTOR GERALD ABREU, THE ABUNDANT LIFE  
7     CHURCH OF GOD FROM THE TORRANCE IN THE FOURTH DISTRICT WILL  
8     GIVE US OUR INVOCATION. THE PLEDGE WILL BE BY VIOLA ORLAFF,  
9     WHO IS AN ADJUTANT SAN FERNANDO VALLEY POST NUMBER 603 JEWISH  
10    WAR VETERANS OF THE USA FROM THE THIRD DISTRICT. PASTOR ABREU?

11  
12   **PASTOR GERALD ABREU:** OUR FATHER IN HEAVEN, HOLY IS YOUR NAME.  
13   GRANT UNTO US YOUR WISDOM, YOUR COURAGE, YOUR STRENGTH FOR ALL  
14   THAT LIES BEFORE US TODAY. GIVE US THIS DAY OUR DAILY BREAD.  
15   LEAD US NOT INTO TEMPTATION, BUT DELIVER US FROM EVIL. PLEASE  
16   FORGIVE US OUR TRESPASSES AS WE FORGIVE THOSE WHO'VE  
17   TRESPASSED AGAINST US. BE WITH US AS YOU WERE WITH OUR  
18   FOUNDING FATHERS. DO NOT LEAVE US OR FORSAKE US, SO THAT WE  
19   MAY INCLINE OUR HEARTS AND EARS TO YOUR STILL-SMALL VOICE, TO  
20   WALK IN ALL YOUR WAYS, THAT ALL THE PEOPLE TO THE EARTH MAY  
21   KNOW THAT YOU ALONE ARE THE SOVEREIGN LORD AND THAT THERE IS  
22   NO OTHER. AND WE PRAY TODAY FOR YOUR STRENGTH UPON THIS  
23   MEETING, GOD, AND WE JUST ASK THAT YOUR WILL, WILL BE DONE.  
24   AMEN.

25





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1 **VIOLA ORLAFF:** REPEAT AFTER ME. [ Pledge of Allegiance ]

2

3 **SUP. KNABE:** MADAM CHAIR, MEMBERS OF THE BOARD, IT'S MY  
4 PLEASURE TO INTRODUCE - HE LED US IN THE INVOCATION, THE  
5 REVEREND GERALD ABREU AND HIS WIFE, CARLA. IS CARLA HERE? OH,  
6 SHE'S NOT HERE. OKAY. HE IS THE PASTOR OF THE ABUNDANT LIFE  
7 CHURCH OF GOD IN TORRANCE. REVEREND ABREU AND HIS WIFE HAVE  
8 BEEN SOUTH BAY RESIDENTS SINCE SEPTEMBER WITH THEIR THREE  
9 CHILDREN. PRIOR TO THAT, HE WAS A PASTOR AT THE TABERNACLE OF  
10 PRAISE CHURCH IN WEST VIRGINIA FOR THE PAST 12 YEARS. NOW, WE  
11 DON'T GET PASTORS LIKE THIS VERY OFTEN, BUT PASTOR ABREU WAS  
12 RECENTLY IN THE NEWS AS ONE OF THE THREE PASTORS NAMED BY  
13 POWERBALL WINNERS, MR. AND MRS. ANDREW WHITTAKER OF WEST  
14 VIRGINIA, WHO GAVE 10% OF THEIR WINNINGS TO THEIR FAVORITE  
15 MINISTRIES. MR. WHITTAKER HAD BEEN VERY ILL WITH PANCREATIS  
16 FOR A LONG PERIOD OF TIME AND REVEREND ABREU AND HIS FAMILY  
17 SPENT MANY DAYS AND NIGHTS AT THE HOSPITAL WITH HIS  
18 PARISHIONER. HE HAS A NEW CONGREGATION AT SOUTH BAY AND WE  
19 WELCOME HIS MINISTRY AND SPIRITUAL GUIDANCE TO THE SOUTH BAY,  
20 AND CONGRATULATE HIM FOR BEING ONE OF THOSE THREE, AND WE HAVE  
21 A COUNTY BUDGET SHORTFALL... NO. [ Light Laughter ] [ Applause  
22 ]

23

24 **SUP. YAROSLAVSKY:** MADAM CHAIR, I WANT TO PRESENT THIS  
25 CERTIFICATE OF APPRECIATION TO VIOLA ORLAFF, WHO LED US IN THE



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1 PLEDGE OF ALLEGIANCE THIS MORNING. VIOLA IS REPRESENTING THE  
2 SAN FERNANDO VALLEY POST 603 OF THE JEWISH WAR VETERANS. SHE  
3 SERVED AS A SERGEANT IN THE UNITED STATES ARMY, IN THE SIGNAL  
4 CORPS FROM 1943 TO '45, RECEIVED THE U.S. ARMY GOOD CONDUCT  
5 MEDAL, NATIONAL DEFENSE SERVICE MEDAL. SHE WORKS FOR BLUE  
6 CROSS LABORATORIES AND HAS TWO CHILDREN AND LIVES IN THE THIRD  
7 SUPERVISORIAL DISTRICT. THANK YOU FOR LEADING US IN THE  
8 PLEDGE. [ Applause ]

9

10 **CLERK VARONA-LUKENS:** THANK YOU, MADAM CHAIR. WE'LL BEGIN ON  
11 PAGE 3 AND WE'LL ANNOUNCE ALL THE HOLDS, AND THEN WE'LL COME  
12 BACK TO THE PUBLIC HEARING ITEMS AFTER THE PRESENTATIONS. SO  
13 ON PAGE 3, AGENDA FOR THE MEETING OF THE COMMUNITY DEVELOPMENT  
14 COMMISSION. ON ITEM 1-D, WE'LL HOLD FOR THE PUBLIC HEARING. ON  
15 PAGE 5, ON ITEM NUMBER 6, AT THE MEETING OF JANUARY 21, THE  
16 BOARD DECLARED ITS INTENT TO CONTINUE THIS WITHOUT DISCUSSION  
17 TO MARCH 25th, 2003, AT 9:30.

18

19 **SUP. BURKE, CHAIR:** SO ORDERED.

20

21 **CLERK VARONA-LUKENS:** ADMINISTRATIVE MATTERS --

22

23 **SUP. BURKE, CHAIR:** LET ME JUST MAKE SURE EVERYONE UNDERSTANDS.  
24 ITEM NUMBER 6 IS CONTINUED TO MARCH 26th AT 9:30. I'M SORRY,  
25 MARCH 25th AT 9:30.



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1

2 **CLERK VARONA-LUKENS:** ADMINISTRATIVE MATTERS, BOARD OF  
3 SUPERVISORS, ITEMS 10 THROUGH 17, ON ITEM NUMBER 10, HOLD FOR  
4 SUPERVISOR BURKE AND SUPERVISOR KNABE. ON ITEM NUMBER 11, THAT  
5 ALSO INCLUDES THE REVISION AS NOTED ON THE GREEN SHEET, AND  
6 WE'LL HOLD THAT FOR SUPERVISOR ANTONOVICH. ON ITEM NUMBER 12,  
7 SUPERVISORS BURKE AND ANTONOVICH REQUEST A ONE-WEEK  
8 CONTINUANCE.

9

10 **SUP. BURKE, CHAIR:** WITHOUT OBJECTION, ITEM 12 WILL BE  
11 CONTINUED FOR ONE WEEK.

12

13 **CLERK VARONA-LUKENS:** ON ITEM NUMBER 13, HOLD FOR SUPERVISOR  
14 BURKE. AND ON ITEM NUMBER 16, HOLD FOR SUPERVISOR BURKE AND  
15 GENEVIEVE CLAVREUL. 16.

16

17 **SUP. BURKE, CHAIR:** ON THE REMAINDER, MOVED BY KNABE, SECONDED  
18 BY YAROSLAVSKY. WITHOUT OBJECTION, SO ORDERED.

19

20 **CLERK VARONA-LUKENS:** ADMINISTRATIVE OFFICER, ITEM 18, THE  
21 CHIEF ADMINISTRATIVE OFFICER REQUESTS THAT THIS ITEM BE  
22 REFERRED BACK TO HIS OFFICE.

23

24 **SUP. BURKE, CHAIR:** WITHOUT OBJECTION, 18 WILL BE REFERRED BACK  
25 TO THE C.A.O.



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1

2 **CLERK VARONA-LUKENS:** HEALTH SERVICES, ITEM 19.

3

4 **SUP. BURKE, CHAIR:** MOVED BY ANTONOVICH, SECONDED BY  
5 YAROSLAVSKY. WITHOUT OBJECTION, SO ORDERED.

6

7 **CLERK VARONA-LUKENS:** MENTAL HEALTH, ON ITEM NUMBER 20,  
8 SUPERVISOR ANTONOVICH ALSO REQUESTS THAT THE BOARD INSTRUCT  
9 THE DEPARTMENT OF MENTAL HEALTH TO PROVIDE QUARTERLY PROGRESS  
10 REPORTS ON THE IMPLEMENTATION OF AB 1421. SO THAT ITEM WITH  
11 THE AMENDMENT IS BEFORE YOU.

12

13 **SUP. BURKE, CHAIR:** AS AMENDED BY ANTONOVICH, IT'S MOVED BY  
14 ANTONOVICH AND SECONDED BY KNABE. WITHOUT OBJECTION, APPROVED  
15 AS AMENDED.

16

17 **CLERK VARONA-LUKENS:** PUBLIC SOCIAL SERVICES, ITEM 21.

18

19 **SUP. BURKE, CHAIR:** MOVED BY YAROSLAVSKY, SECONDED BY KNABE.  
20 WITHOUT OBJECTION, SO ORDERED.

21

22 **CLERK VARONA-LUKENS:** MISCELLANEOUS COMMUNICATIONS, ITEM 22 AND  
23 23.

24





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1   **SUP. BURKE, CHAIR:** MOVED BY ANTONOVICH, SECONDED BY KNABE.

2   WITHOUT OBJECTION, SO ORDERED.

3

4   **CLERK VARONA-LUKENS:** ORDINANCES FOR ADOPTION, ITEMS 24 THROUGH  
5   26. ON ITEM NUMBER 24, SUPERVISOR ANTONOVICH REQUESTS A ONE-  
6   WEEK CONTINUANCE TO FEBRUARY 4, 2003.

7

8   **SUP. BURKE, CHAIR:** WITHOUT OBJECTION, THAT'S CONTINUED. THAT'S  
9   24, FOR ONE WEEK.

10

11   **CLERK VARONA-LUKENS:** AND ITEMS 25 AND 26 ARE BEFORE YOU.

12

13   **SUP. BURKE, CHAIR:** MOVED BY KNABE, SECONDED BY YAROSLAVSKY.  
14   WITHOUT OBJECTION, SO ORDERED.

15

16   **CLERK VARONA-LUKENS:** MISCELLANEOUS, ADDITIONS TO THE AGENDA  
17   REQUESTED BY BOARD MEMBERS AND THE CHIEF ADMINISTRATIVE  
18   OFFICER, WHICH WERE POSTED MORE THAN 72 HOURS IN ADVANCE OF  
19   THE MEETING, AS INDICATED ON THE GREEN SUPPLEMENTAL AGENDA.  
20   ITEM NUMBER 27-A.

21

22   **SUP. BURKE, CHAIR:** MOVED BY ANTONOVICH, SECONDED BY KNABE.  
23   WITHOUT OBJECTION, SO ORDERED.

24



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1 **CLERK VARONA-LUKENS:** AND THAT COMPLETES THE READING OF THE  
2 AGENDA. BOARD OF SUPERVISORS' SPECIAL ITEMS BEGIN WITH  
3 SUPERVISORIAL DISTRICT NO. 5.

4  
5 **SUP. ANTONOVICH:** ON ITEM 11, I CAN RELEASE MY HOLD, AS LONG AS  
6 WE HAVE AN ORAL REPORT WITHIN TWO WEEKS.

7  
8 **SUP. BURKE, CHAIR:** ON ITEM 11, SUPERVISOR ANTONOVICH MOVES AND  
9 AMENDS THAT TO REQUEST A REPORT BACK WITHIN TWO WEEKS. IT NEED  
10 NOT BE A WRITTEN REPORT BY THE DEPARTMENT, JUST AN ORAL  
11 REPORT. SECONDED BY KNABE. WITHOUT OBJECTION, ITEM 11 IS  
12 ADOPTED. I THINK THAT YOU HAVE -- YOU START. FIFTH DISTRICT IS  
13 UP FIRST IN TERMS OF PRESENTATIONS.

14  
15 **SUP. ANTONOVICH:** WE'VE BEEN INVOLVED IN THE -- ENCOURAGING  
16 PEOPLE TO BECOME FOSTER PARENTS AND TO ADOPT CHILDREN, AND  
17 WHEN I HAD THE OPPORTUNITY OF SPEAKING AT A RECENT EAGLE SCOUT  
18 AWARD PROGRAM IN GRANADA HILLS, WE WERE ABLE TO HAVE AN  
19 OPPORTUNITY TO MEET A YOUNG MAN WHO WAS A FOSTER CHILD WHO IS  
20 ON HIS WAY TO BECOMING AN EAGLE SCOUT AND ABLE TO MEET HIS  
21 PARENTS, BOB AND RITA PRETZEL, TO COMMEND THEM ON THEIR 35  
22 YEARS OF SUPPORT TO FOSTER CHILDREN AND FROM THE L.A. COUNTY  
23 DEPARTMENT OF FAMILY CHILDREN SERVICES. SINCE 1968, THIS  
24 FAMILY HAVE TAKEN IN 71 CHILDREN, MANY OF THEM NEWBORN BABIES,  
25 RAISING THEM AS THEIR OWN CHILDREN. AND OVER THE YEARS,



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1 THEY'VE HAD CHILDREN FOR PERIODS OF A FEW WEEKS TO THE ENTIRE  
2 TIME UNTIL THEY WERE EMANCIPATED, BUT WHAT THEY HAVE DONE,  
3 THEY'VE BEEN ABLE TO KEEP IN TOUCH AND ACT AS THAT PARENT FOR  
4 THESE YOUNG PEOPLE WHEN THEY HAVE BECOME EMANCIPATED AND  
5 CONTINUE TO BE THE PARENT AS THEY ARE, GIVING THEM THEIR LOVE,  
6 THE SUPPORT, AND THE SPIRITUAL FOUNDATION TO BECOME A  
7 PRODUCTIVE CITIZEN. THEY CURRENTLY HAVE A 16 AND 1/2-YEAR-OLD  
8 SON, THE ONE I MENTIONED, WHO IS A STUDENT IN HIGH SCHOOL AND  
9 ON HIS WAY TO BECOMING AN EAGLE SCOUT, AND THEY ARE ALSO  
10 AWAITING A NEW BABY GIRL ALONG WITH -- WHO WILL BE ARRIVING  
11 ANY TIME, AND THEY ALSO HAVE TWO CHILDREN OF THEIR OWN. SO AT  
12 THIS TIME, WE WOULD LIKE TO RECOGNIZE THIS FAMILY FOR  
13 PROVIDING THAT TYPE OF HOME FOR THESE YOUNG PEOPLE SO THAT WE  
14 CAN HAVE A BETTER COMMUNITY. SO THANK YOU VERY MUCH, BOB AND  
15 RITA, FOR YOUR LEADERSHIP AND WE WISH YOU CONTINUED SUCCESS. [  
16 Applause ]

17  
18 **SUP. ANTONOVICH:** BOB AND RITA PRETZEL. HOW ARE YOU?

19  
20 **RITA PRETZEL:** WONDERFUL. IT'S QUITE AN HONOR TO BE PRESENTED  
21 THIS. THANK YOU VERY MUCH, MR. ANTONOVICH.

22  
23 **SUP. ANTONOVICH:** TELL THEM ABOUT SOME OF THE CHILDREN THAT  
24 YOU'VE HAD.



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1   **RITA PRETZEL:** WE'VE HAD ALL KINDS OF CHILDREN. ALL RACES. MOST  
2   OF THEM HAVE BEEN NEWBORN BABIES, AND WE'VE KEPT THEM ANYWHERE  
3   FROM JUST A FEW WEEKS TO SEVERAL YEARS, AND THE 16 AND 1/2-  
4   YEAR-OLD BOY WE HAVE RIGHT NOW, WE GOT HIM RIGHT FROM THE  
5   HOSPITAL. HE WAS SIX WEEKS OLD BECAUSE HE WAS A PREMIE, WHEN  
6   WE GOT HIM AT SIX WEEKS, HE WAS SIX POUNDS -- FOUR POUNDS, 10  
7   OUNCES AND NOW HE'S OVER SIX FEET AND 171.

8

9   **SUP. ANTONOVICH:** THANK YOU. [ Applause ]

10

11   **SUP. ANTONOVICH:** AND NOW WE HAVE A LITTLE CORGI MIX, IT'S A  
12   LITTLE GIRL, SHE'S 8 MONTHS OLD, LITTLE LUCY, THIS IS A BIG 8  
13   MONTH OLD GIRL. SHE'S HAD A LOT OF BIG MACS, I THINK. OKAY. SO  
14   THIS IS LUCY. EIGHT MONTHS OLD. SHE MIGHT GET A LITTLE BIT  
15   BIGGER. ANYBODY IN THE AUDIENCE WHO'D LIKE TO ADOPT LUCY?  
16   ANYBODY? THOSE AT HOME CAN CALL THE AREA CODE 562-728-4644, OR  
17   THOSE IN THE AUDIENCE. SO THIS IS GOING TO BE A BIG DOG.  
18   ANYBODY FOR LUCY?

19

20   **SUP. BURKE, CHAIR:** I DON'T LIKE BIG DOGS. GLORIA'S NOT HERE. I  
21   DON'T KNOW WHETHER SHE HAS PRESENTATIONS, BUT I'LL GO ON WITH  
22   MY PRESENTATION. I'D LIKE TO CALL STEVEN TREANOR FORWARD. AS  
23   HE'S COMING FORWARD, LET ME JUST TELL YOU A LITTLE BIT ABOUT  
24   HIM. IN 1973, STEVEN TREANOR JOINED THE CALIFORNIA STATE PARK  
25   SYSTEM AS A CADET AT THE BIG BASE IN REDWOOD STATE PARK. IN





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1 THE 30 YEARS THAT HAVE TRANSPIRED, HE HAS WORKED IN NUMEROUS  
2 POSITIONS WITH THE PARK SYSTEM CULMINATING IN HIS BECOMING  
3 CHIEF FOR THE STATE PARK FIELD SERVICES FOR THE SOUTHERN  
4 DIVISION. HE'S BEEN INVOLVED IN POSITIVE WORKING RELATIONSHIPS  
5 WITH THE COUNTY FAMILY IN AREAS OF MUTUAL CONCERN SUCH AS THE  
6 KENNETH HAHN RECREATION AREA, CASTAIC LAKE, CLARSARITA CANYON  
7 NATURAL AREA PARK, VETERAN MEMORIAL PARK AND OTHERS. HE'S  
8 DEDICATED HIS TIME, ENERGY, AND PERSONAL COMMITMENT TO MAKING  
9 STATE PARK FACILITIES MORE RELEVANT TO THE LIFESTYLE AND  
10 QUALITY OF LIFE OF CALIFORNIANS AND TO MAKING PARKS MORE  
11 INCLUSIVE TO EVERYONE IN OUR EVER-CHANGING VISITOR AND URBAN  
12 POPULATION. NOW HE'S RETIRING FROM THE STATE PARK DEPARTMENT  
13 AND WE MUST SAY FAREWELL, BUT I AM CERTAIN IT WILL NOT BE  
14 GOOD-BYE, AFTER ALL THESE YEARS OF OUTSTANDING SERVICE AND  
15 DEDICATION TO THE PEOPLE OF CALIFORNIA, AND ESPECIALLY TO  
16 THOSE IN LOS ANGELES, I KNOW WE HAVE NOT SEEN THE LAST OF HIM.  
17 AT THE VERY LEAST, HE'S LEAVING US A VERY FITTING LEGACY OF  
18 HIS WORK IN THE BEAUTIFUL PARK LANDS WE NOW ENJOY IN THE URBAN  
19 AREAS OF LOS ANGELES AND IN THE PLANS FOR GREAT URBAN PARK IN  
20 THE BALDWIN HILLS AREA. STEVE, CONGRATULATIONS ON ALL THESE  
21 YEARS OF SERVICE. [ Applause ]

22

23 **STEVEN TREANOR:** THIS IS A TREMENDOUS HONOR FOR SOMEONE WHO HAS  
24 SPENT THEIR LIFE IN THE WOODS AND CAME TO THE BIG CITY. AND  
25 THE HONOR REALLY IS TO BE -- HAVE BEEN A PART OF THIS



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1 COMMUNITY AND CREATING OPPORTUNITIES FOR FOLKS TO RECREATE AND  
2 IMPROVE THEIR QUALITY OF LIFE, AND IT'S REALLY HAS BEEN A  
3 PRIVILEGE FOR ME IS TO BE A PART OF THE COUNTY'S EFFORT AND  
4 RECOGNITION OF THE NEED AND THE POWER OF PARKS IN A COMMUNITY,  
5 AND TO SEE THAT THIS COMMUNITY EMBRACES THIS PARTICULAR  
6 MOVEMENT SO WELCOMINGLY AND HAS EMBRACED ME AND THE STATE PARK  
7 SYSTEM SO WELL. AND IN TERMS OF THAT LEGACY THAT WE BRING, I  
8 WANTED TO SHARE THIS MOMENT WITH MY STAFF THAT WAS REALLY  
9 BUILT HERE IN THE LAST COUPLE OF YEARS THAT IS GOING TO  
10 CONTINUE TO SUPPORT THE EFFORTS HERE IN LOS ANGELES AND WORK  
11 WITH YOU AND WORK WITH THE TWO PEOPLE I CALL THE LOS ANGELES  
12 COUNTY G-MEN, GALLAGHER AND GUINEA. AND MR. GALLAGHER AND MR.  
13 GUINEA REALLY HAVE SET A WONDERFUL TONE HERE OF LEADERSHIP IN  
14 THE PARKS AND I COMMEND THE COUNTY ON THEIR SELECTION TO SERVE  
15 YOU HERE AND PLEDGE THROUGH MY FOLKS HERE, AND I'M GOING TO  
16 HOLD THEM ACCOUNTABLE, PLEDGE OUR CONTINUED ALLIANCE AND  
17 SUPPORT OF THE COUNTY EFFORTS. SO THANK YOU VERY MUCH FOR THIS  
18 WONDERFUL HONOR.

19  
20 **SUP. BURKE, CHAIR:** THANK YOU, AND WE CERTAINLY WILL BE WORKING  
21 TOGETHER, WE HAVE TO FIGURE OUT A WAY TO GET YOU BACK INTO  
22 THIS. [ Applause ]

23  
24 **SUP. BURKE, CHAIR:** THAT CONCLUDES -- DOES ANYONE ELSE HAVE ANY  
25 OTHER PRESENTATIONS? IF NOT, WE'LL GO ON WITH THE SPECIALS AND



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1 THE ADJOURNMENTS. SUPERVISOR ANTONOVICH, YOU'RE UP FIRST, OR  
2 SHOULD WE DO THE PUBLIC HEARING FIRST? WE'LL DO THE PUBLIC  
3 HEARING FIRST.

4

5 **CLERK VARONA-LUKENS:** MADAM CHAIR, IF I COULD ASK ALL THOSE WHO  
6 PLAN TO TESTIFY BEFORE THE BOARD, PLEASE STAND AND RAISE YOUR  
7 RIGHT-HAND AND BE SWORN IN, ON ANY OF THE PUBLIC HEARING  
8 ITEMS. [ Administering Oath ]

9

10 **CLERK VARONA-LUKENS:** THANK YOU. PLEASE BE SEATED.

11

12 **SUP. BURKE, CHAIR:** ALL RIGHT. DO WE HAVE ANYONE TO -- FROM THE  
13 DEPARTMENT TO, EXCUSE ME, COUNTY COUNSEL?

14

15 **CLERK VARONA-LUKENS:** SO ON ITEM NUMBER 1, HEARING ON  
16 ANNEXATION OF 15 PARCELS TO THE CONSOLIDATED SEWER MAINTENANCE  
17 DISTRICT WITHIN THE UNINCORPORATED TERRITORIES AND CITIES OF  
18 LANCASTER, PALMDALE, PICO RIVERA AND RANCHO PALOS VERDES. AND  
19 MADAM CHAIR, WE HAVE NO WRITTEN PROTESTS FOR THIS ITEM.

20

21 **SUP. BURKE, CHAIR:** YES. THE DEPARTMENT?

22

23 **NICHOLAS ABUBU:** MY NAME IS NICOLAS ABUBU, I'M A SENIOR CIVIL  
24 ENGINEER FOR THE DEPARTMENT OF PUBLIC WORKS. I AM FAMILIAR  
25 WITH THESE PROCEEDINGS FOR THE ANNEXATION AND LEVY OF SEWER



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1 CITY'S CHARGE FOR THE 15 PARCELS DESCRIBED IN THE BOARD LETTER  
2 TO THE CONSOLIDATED SEWER MAINTENANCE DISTRICT. SOME OF THE  
3 PARCELS TO BE ANNEXED LIE WITHIN THE CITIES OF LANCASTER,  
4 PALMDALE, PICO RIVERA AND RANCHO PALOS VERDES AND THE CONSENT  
5 AND JURISDICTIONS OF THOSE CITIES HAS BEEN OBTAINED. IN MY  
6 OPINION, ALL THE 15 PARCELS TO BE ANNEXED WILL BE BENEFITED BY  
7 THE ANNEXATION AND THE SERVICES TO BE PROVIDED. IN MY OPINION,  
8 THE CHARGES HAVE BEEN FAIRLY IMPOSED. IN THE EVENT OF NO  
9 MAJORITY WRITTEN PROTESTS, WE RECOMMEND THAT YOU APPROVE THE  
10 ANNEXATION AND THE LEVY OF SEWER SERVICE CHARGES FOR THESE 15  
11 PARCELS.

12

13 **SUP. BURKE, CHAIR:** THERE ARE NO PROTESTS.

14

15 **RICHARD WEISS:** YOUR BOARD IS FREE, THEN, TO FOLLOW THE  
16 RECOMMENDATION OF THE DEPARTMENT.

17

18 **SUP. BURKE, CHAIR:** ALL RIGHT. IT'S MOVED BY ANTONOVICH AND  
19 SECONDED BY KNABE THAT THE HEARING BE CLOSED AND THAT THEY  
20 REAPPROVE THE ANNEXATIONS AS SET FORTH IN 1-D. WITHOUT  
21 OBJECTION, SO ORDERED.

22

23 **CLERK VARONA-LUKENS:** ITEM NUMBER 2, HEARING ON ANNEXATION OF  
24 TERRITORIES TO COUNTY LIGHTING MAINTENANCE DISTRICTS 1687 AND  
25 1697 AND TO COUNTY LIGHTING DISTRICT LLA-1, UNINCORPORATED AND





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1 CARSON ZONES ONE AND TWO AND TO LEVY AND COLLECT ASSESSMENTS  
2 WITHIN THE ANNEXED TERRITORIES FOR STREET LIGHTING PURPOSES.  
3 AND WE HAVE NO WRITTEN PROTESTS, MADAM CHAIR.

4

5 **BALMAN HAJIALIAKBAR:** MY NAME IS BALMAN HAJIALIAKBAR AND I'M A  
6 SENIOR CIVIL ENGINEER FOR THE DEPARTMENT OF PUBLIC WORKS, AND  
7 I'M FAMILIAR WITH THIS PROCEEDING FOR THE ANNEXATION OF  
8 TERRITORY TO LIGHTING MAINTENANCE DISTRICT 1687 AND 1697 AND  
9 TO COUNTY LIGHTING DISTRICT LLA-1 AND THE LEVY AND COLLECTION  
10 OF ASSESSMENTS WITH RESPECT TO THE PETITION AREAS IDENTIFIED  
11 IN THE BOARD LETTER. IN MY OPINION, ALL OF THE AREAS COVERED  
12 BY THESE PETITIONS WILL BE BENEFITED BY THE ANNEXATION AND THE  
13 SERVICE TO BE PROVIDED AND THE PROPOSED ASSESSMENT HAVE BEEN  
14 SPREAD IN PROPORTION TO BENEFIT. THE CONSENT AND JURISDICTION  
15 OF CITY OF CARSON HAS BEEN OBTAINED FOR THE PETITION AREAS  
16 THAT LIE WITHIN THE CITY'S BOUNDARY. IN THE EVENT THAT THERE  
17 ARE NO MAJORITY PROTESTS IN ANY OF THE PETITION AREAS, WE ARE  
18 RECOMMENDING THAT YOUR BOARD ADOPT THE RECOMMENDATIONS TO  
19 ANNEX AND LEVY THE PROPOSED ASSESSMENTS.

20

21 **SUP. BURKE, CHAIR:** ALL RIGHT. COUNTY COUNSEL?

22

23 **RICHARD WEISS:** MADAM CHAIR, IT WOULD BE APPROPRIATE TO RECEIVE  
24 ANY ORAL TESTIMONY AT THIS TIME AND THEN TO TABLE THE MATTER



**The Meeting Transcript of  
The Los Angeles County Board of Supervisors**

1 SO THAT THE CLERK OF THE BOARD CAN TABULATE BALLOTS 'TIL LATER  
2 IN THE MEETING.

3

4 **SUP. BURKE, CHAIR:** I MOVE WE CLOSE THE HEARING, TABLE THE ITEM  
5 UNTIL LATER IN THE MEETING FOR THE TABULATION RESULTS BY THE  
6 EXECUTIVE OFFICER AND DECISION BY THE BOARD. SECONDED BY  
7 SUPERVISOR MOLINA.

8

9 **CLERK VARONA-LUKENS:** ITEM NUMBER 3, HEARING ON ANNEXATION OF  
10 SUBDIVISION TERRITORIES TO COUNTY LIGHTING MAINTENANCE  
11 DISTRICT 1687 AND COUNTY LIGHTING DISTRICT LLA-1,  
12 UNINCORPORATED ZONE 1, 4, AND 5 AND TO LEVY AND COLLECT  
13 ASSESSMENTS WITHIN ANNEXED SUBDIVISION TERRITORIES FOR STREET  
14 LIGHTING PURPOSES. AND WE HAVE NO WRITTEN PROTESTS, MADAM  
15 CHAIR.

16

17 **SUP. BURKE, CHAIR:** COUNTY COUNSEL?

18

19 **RICHARD WEISS:** A BRIEF -- A STAFF PRESENTATION AGAIN MADAM  
20 CHAIR.

21

22 **BALMAN HAJIALIAKBAR:** MY NAME IS BALMAN HAJIALIAKBAR AND I'M A  
23 SENIOR CIVIL ENGINEER FOR THE DEPARTMENT OF PUBLIC WORKS. I'M  
24 FAMILIAR WITH THIS PROCEEDING FOR THE ANNEXATION OF  
25 SUBDIVISION PROJECTS AREAS TO LIGHTING MAINTENANCE DISTRICT



**The Meeting Transcript of  
The Los Angeles County Board of Supervisors**

1 1687 AND COUNTY LIGHTING DISTRICT LLA-1 AND FOR THE LEVY AND  
2 COLLECTION OF ASSESSMENTS WITHIN THESE SUBDIVISION AREAS. NONE  
3 OF THE INVOLVED AREAS LIE WITHIN THE BOUNDARIES OF ANY CITY.  
4 IN MY OPINION, THE IDENTIFIED AREAS WILL BE BENEFITED BY THE  
5 ANNEXATION AND THE SERVICE TO BE PROVIDED AND THE PROPOSED  
6 ASSESSMENTS HAVE BEEN SPREAD IN PROPORTION TO BENEFIT. IN THE  
7 EVENT THAT THERE ARE NO MAJORITY PROTESTS IN THESE AREAS, WE  
8 ARE RECOMMENDING THAT YOUR BOARD ADOPT THE RECOMMENDATIONS TO  
9 ANNEX AND LEVY THE PROPOSED ASSESSMENTS.

10

11 **RICHARD WEISS:** AGAIN, MADAM CHAIR, I WOULD RECEIVE ANY ORAL  
12 TESTIMONY AND THEN WE'D RECOMMEND THAT YOU TABLE THE MATTER  
13 UNTIL LATER IN THE MEETING SO THE BALLOTS CAN BE TABULATED.

14

15 **SUP. BURKE, CHAIR:** I MOVE THAT WE CLOSE THE HEARING, TABLE THE  
16 ITEM UNTIL LATER IN THE MEETING FOR THE TABULATION RESULTS BY  
17 THE EXECUTIVE OFFICER AND DECISION BY THE BOARD. SECONDED BY  
18 SUPERVISOR ANTONOVICH. AND WITHOUT OBJECTION, SO ORDERED.

19

20 **CLERK VARONA-LUKENS:** ITEM NUMBER 4, HEARING ON THE CONVEYANCE  
21 OF PROPERTY FROM THE COMMUNITY DEVELOPMENT COMMISSION TO MUKAI  
22 MARAVILLA, LLC, AN AMOUNT OF \$277,000 FOR THE DEVELOPMENT OF A  
23 COMMERCIAL CENTER IN THE MARAVILLA COMMUNITY REDEVELOPMENT  
24 PROJECT AREA. AND MADAM CHAIR, WE HAVE NO WRITTEN PROTESTS ON  
25 THIS ITEM AND IT WOULD ALSO BE APPROPRIATE TO TAKE UP 1-D.



**The Meeting Transcript of  
The Los Angeles County Board of Supervisors**

1

2 **SUP. BURKE, CHAIR:** IT'S MOVED BY -- DO WE HAVE THE REPORT FROM  
3 THE DEPARTMENT? THAT'S NOT NECESSARY? THEN IT'S MOVED BY  
4 SUPERVISOR MOLINA THAT ITEM I-D AND 4 THAT THE HEARING BE  
5 CLOSED. IT'S SECONDED BY SUPERVISOR KNABE, AND WITHOUT  
6 OBJECTION IT'S APPROVED, ITEM 1-D AND 4.

7

8 **CLERK VARONA-LUKENS:** ITEM NUMBER 5, HEARING ON THE PURCHASE OF  
9 REAL PROPERTY FROM THE CALIFORNIA DEPARTMENT OF TRANSPORTATION  
10 LOCATED IN WRIGHTWOOD IN THE AMOUNT OF \$520,000, AND WE HAVE  
11 NO WRITTEN PROTESTS MADAM CHAIR.

12

13 **SUP. BURKE, CHAIR:** ALL RIGHT, IS IT APPROPRIATE FOR THE  
14 DEPARTMENT TO TESTIFY ON THIS? ALL RIGHT, IF NOT, THEN IT'S  
15 MOVED BY ANTONOVICH THAT THE HEARING BE CLOSED AND THE ITEM BE  
16 APPROVED. SECONDED BY YAROSLAVSKY, WITHOUT OBJECTION, SO  
17 ORDERED.

18

19 **CLERK VARONA-LUKENS:** ON ITEM NUMBER 6, MADAM CHAIR, THAT'S  
20 BEEN CONTINUED TO MARCH 25th, 2003. SO ON ITEM NUMBER 7,  
21 COMBINED HEARING ON ZONE CHANGE AND CONDITIONAL USE PERMIT,  
22 CASE NUMBER 001195 TO AUTHORIZE THE DEVELOPMENT OF AN AIRPORT  
23 SHUTTLE SERVICE LOCATED IN THE PALMDALE ZONE DISTRICT TO THE -  
24 - TO LOS ANGELES INTERNATIONAL AIRPORT PETITIONED BY THOMAS L.  
25 MILLER. WE HAVE NO WRITTEN PROFITS, MADAM CHAIR.



**The Meeting Transcript of  
The Los Angeles County Board of Supervisors**

1

2 **SUP. BURKE, CHAIR:** NO WRITTEN PROTESTS -- ARE THOSE WRITTEN  
3 PROTESTS? THERE ARE TWO PEOPLE WHO HAVE INDICATED THEY'RE IN  
4 FAVOR. WE'LL RECOGNIZE THEM: ROD BRUCE AND THOMAS MILLER.  
5 THERE ARE NO PROTESTS. DO YOU FEEL IT NECESSARY TO TESTIFY?  
6 ALL RIGHT. IF NOT, IT'S MOVED BY ANTONOVICH, SECONDED BY  
7 KNABE. AND WITHOUT OBJECTION, ITEM 7 IS APPROVED.

8

9 **CLERK VARONA-LUKENS:** ITEM NUMBER 8, COMBINED HEARING ON LOCAL  
10 PLAN AMENDMENT ZONE CHANGE AND CONDITIONAL USE PERMIT CASE  
11 NUMBER 0010721 TO AUTHORIZE THE DEMOLITION OF AN EXISTING MINI  
12 MART AND SERVICE STATION WITH A MECHANIC LUBE BUILDING, AND  
13 AUTHORIZE CONSTRUCTION OF A NEW MINI MART AND SERVICE STATION  
14 BUILDING WITH TWO NEW FUELING PUMPS AND CANOPY AND AN  
15 UNDERGROUND GASOLINE STORAGE TANK LOCATED IN THE EAST SIDE  
16 UNIT NUMBER ONE ZONE DISTRICT, PETITIONED BY AHMAD-KASEEM  
17 ELSAGHIR AND HADIYA LAHHAM. WE HAVE NO WRITTEN PROTESTS MADAM  
18 CHAIR.

19

20 **SUP. BURKE, CHAIR:** NO WRITTEN PROTESTS, IT'S MOVED BY  
21 YAROSLAVSKY, SECONDED BY ANTONOVICH, I DON'T SEE SUPERVISOR  
22 MOLINA. WITHOUT OBJECTION, SO ORDERED.

23

24 **CLERK VARONA-LUKENS:** ITEM NUMBER 9, HEARING ON ZONE CHANGE  
25 CASE NUMBER 00262 TO PROHIBIT CONSTRUCTION OF BILLBOARDS IN



**The Meeting Transcript of  
The Los Angeles County Board of Supervisors**

1 THE BEL AIR AND WIESSEBURN COMMUNITIES, LOCATED IN THE  
2 SOUTHWEST ZONE DISTRICT, PETITIONED BY THE LOS ANGELES COUNTY  
3 BOARD OF SUPERVISORS. AND WE HAVE NO WRITTEN PROTESTS, MADAM  
4 CHAIR.

5

6 **SUP. BURKE, CHAIR:** WE HAVE AN AMENDMENT. THIS IS A MOTION. ALL  
7 RIGHT. WE MOVE THAT THE HEARING BE CLOSED AND THAT THE ITEM BE  
8 APPROVED AND THAT THE NEGATIVE DECLARATION PREPARED FOR THE  
9 PROPOSAL INDICATE OUR INTENT TO APPROVE ZONE CHANGE NUMBER  
10 0026 IN THE SECOND DISTRICT AND INSTRUCT COUNTY COUNSEL TO  
11 PREPARE THE FINAL ZONE CHANGE ORDINANCE FOR OUR ADOPTION. AND  
12 SECONDED BY KNABE. WITHOUT OBJECTION, SO ORDERED. DOES THAT  
13 CONCLUDE THE PUBLIC HEARINGS?

14

15 **CLERK VARONA-LUKENS:** YES, MADAM CHAIR.

16

17 **SUP. BURKE, CHAIR:** THEN SUPERVISOR ANTONOVICH, WE'LL ASK YOU  
18 FOR YOUR ADJOURNMENTS.

19

20 **SUP. ANTONOVICH:** I WOULD LIKE TO MOVE WHEN WE ADJOURN TODAY,  
21 WE ADJOURN IN MEMORY OF WILLIAM HENRY DOHENY, WHO LEAVES  
22 BEHIND HIS WIFE OF 56 YEARS AND THREE CHILDREN AND THREE  
23 GRANDCHILDREN, WHO IS QUITE A BUILDER OF LOS ANGELES COUNTY TO  
24 WHAT WE ARE TODAY. TO GRACE MIDGELY KIRKNESS, WHO WAS THE  
25 PASSENGER ON THE METROLINK THAT COLLIDED WITH A TRUCK EARLIER





**The Meeting Transcript of  
The Los Angeles County Board of Supervisors**

1 THIS MONTH IN BURBANK, WHO PASSED AWAY FROM THOSE INJURIES.  
2 JOANN STELLA LACERA, WHO IS THE MOTHER OF MY -- ONE OF MY  
3 OFFICE SECRETARIES, DEBORAH RODARTE, WHO PASSED AWAY AT THE  
4 AGE OF 70 ON JANUARY 22nd. ROBERT ROCKWELL, BEST KNOWN FOR  
5 PLAYING THE BIOLOGY TEACHER WITH OUR EVE ARDNER, OUR MISS  
6 BROOKS, WHO PASSED AWAY AT THE AGE OF 82. DON STANLEY, WHO WAS  
7 THE VOICE OF NBC RADIO FOR 46 YEARS. HE PASSED AWAY AT THE AGE  
8 OF 85. MARGUERITE BOND, A LONG-TIME VALLEY RESIDENT WHO PASSED  
9 AWAY ON JANUARY 4th AT THE AGE OF 82. SHE WAS A VOLUNTEER AT  
10 SACRED HEART CHURCH MOTHER'S GUILD AND AT THE ANTELOPE VALLEY  
11 HOSPITAL. ROBERT WALKER, DR. ROBERT WALKER, WHO WAS A  
12 PSYCHIATRIST FOR 45 YEARS FOR THE LOS ANGELES COUNTY MENTAL  
13 HEALTH AND SHERIFF'S DEPARTMENT AT THE LOS ANGELES COUNTY  
14 JAIL. SO I MOVE THAT WE ADJOURN IN THEIR MEMORIES.

15

16 **SUP. BURKE, CHAIR:** SO ORDERED. BEFORE YOU GO ON, COUNTY  
17 COUNSEL HAS ADVISED, EVEN THOUGH WE'RE CONTINUING ITEM 6, ONE  
18 PERSON HAD ASKED TO SPEAK AND DOES NOT WANT TO COME BACK ON --  
19 THEY DO NOT WANT TO COME BACK ON THE CONTINUANCE DATE, SO WE  
20 WILL RECOGNIZE THEM FOR THREE MINUTES. AND TWO OTHER PEOPLE  
21 HAVE SIGNED UP ON THE DELAY. ALL RIGHT. THE FIRST PERSON, DEAN  
22 FRANCOIS, AND THEN WE'LL CALL LYNN PLAMBECK AND EVANGELINE  
23 SHAW. WOULD ALL THREE COME FORWARD? AND WE'LL RECOGNIZE EACH  
24 ONE OF YOU FOR THREE MINUTES. IS LYNN PLAMBECK HERE?  
25 EVANGELINE SHAW AND DEAN FRANCOIS. I'LL CALL THEM ONE MORE



**The Meeting Transcript of  
The Los Angeles County Board of Supervisors**

1 TIME. WOULD YOU PLEASE COME FORWARD? LYNN PLAMBECK -- WOULD  
2 YOU RAISE YOUR HAND IF YOU'RE HERE? EVANGELINE SHAW, WOULD YOU  
3 RAISE YOUR HAND IF YOU'RE PRESENT? DEAN FRANCOIS, RAISE YOUR  
4 HAND IF YOU'RE PRESENT.

5

6 **DEAN FRANCOIS:** I'M RIGHT HERE, MADAM CHAIR.

7

8 **SUP. BURKE, CHAIR:** OKAY. WE'LL RECOGNIZE YOU.

9

10 **DEAN FRANCOIS:** THANK YOU VERY MUCH. THERE SEEMS TO BE A LITTLE  
11 BIT OF MIX-UP. THE OTHER REASON THE OTHER TWO PEOPLE AREN'T  
12 EVEN HERE IS BECAUSE WE WERE TOLD BY THE CLERK OF THE COURT  
13 THAT WE COULD NOT SPEAK ON THIS ITEM BECAUSE THERE WAS A  
14 DECISION THAT THE ITEM WAS NOT BEING HELD.

15

16 **SUP. BURKE, CHAIR:** IT WAS BEING CONTINUED.

17

18 **DEAN FRANCOIS:** THE HEARING IS BEING CONTINUED UNTIL MARCH.  
19 HOWEVER, THE PUBLIC HAS A RIGHT TO SPEAK ON ANY ACTION ON THE  
20 BOARD --

21

22 **SUP. BURKE, CHAIR:** YOU HAVE THREE MINUTES.

23



**The Meeting Transcript of  
The Los Angeles County Board of Supervisors**

1   **DEAN FRANCOIS:** RIGHT, AND THAT INVOLVES THE ACTION OF WHETHER  
2   AN ITEM IS HELD OR NOT. SO I'M GLAD THAT CLARIFICATION HAS  
3   BEEN MADE.

4

5   **SUP. BURKE, CHAIR:** AND YOUR TIME IS STARTING.

6

7   **DEAN FRANCOIS:** SURE. I CAME UP HERE PRETTY MUCH UNPREPARED TO  
8   TRY TO ARTICULATE EXACTLY WHAT I WANTED TO EXPLAIN TODAY, BUT  
9   AS YOU KNOW, MANY OF US ARE STILL CONCERNED ABOUT THE STATUS  
10   OF OLD GLORY, THE 400-YEAR-OLD OAK TREE THAT SITS IN THE  
11   CENTER OF PROPOSED PICO CANYON ROAD, THIS IS DIRECTLY AFFECTED  
12   BY THE NEWHALL PROJECT WHICH WILL BE PASSED, AND SINCE IT'S  
13   BEING DELAYED, WE SEE EVERY REASON IN THE WORLD THAT WE OUGHT  
14   TO DELAY FURTHER WHAT'S GOING TO HAPPEN TO OUR 400-YEAR-OLD  
15   OAK TREE, A POTENTIAL HISTORIC LANDMARK THAT SITS RIGHT IN THE  
16   WAY OF THE DEVELOPMENT OF PICO CANYON ROAD. NOW, I KNOW WE'VE  
17   BEEN HERE BEFORE, MADAM CHAIR, AND YOU STATED WHY DON'T YOU GO  
18   TO COURT, WHY DON'T YOU TRY COURT ACTION, 'CAUSE THERE REALLY  
19   ISN'T ANYTHING THE SUPERVISORS CAN DO AS FAR AS AN ACTION OF  
20   PUTTING ON THE AGENDA OR SOMETHING, BUT I MUST TELL YOU THAT  
21   WE JUST DON'T HAVE THE LEGAL SUPPORT TO BE ABLE TO DO THAT AND  
22   WE'RE APPEALING TO THE BOARD OF SUPERVISORS 'CAUSE WE BELIEVE  
23   THAT THE COUNTY IS IN VIOLATION OF THE CALIFORNIA  
24   ENVIRONMENTAL QUALITY ACT AND THE ACT PARTICULARLY EXPLAINS  
25   THAT A COMPLETE ENVIRONMENTAL IMPACT REVIEW REPORT MUST BE



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1 COMPLETED, A COMPLETE E.I.R. MUST BE CONDUCTED BEFORE ANY  
2 ADVERSE ACTION IS DONE TO A POTENTIAL HISTORIC LANDMARK, AND  
3 THIS TREE IS CLEARLY A POTENTIAL HISTORIC LANDMARK. I WANT TO  
4 MAKE THAT QUITE CLEAR, AND I HAVE IN FRONT OF YOU A COPY OF  
5 THE PORTIONS OF THE CALIFORNIA ENVIRONMENTAL QUALITY ACT AS IT  
6 PERTAINS TO THIS, AND I WOULD LIKE MADAM CHAIRMAN THAT YOU  
7 COULD MAKE THIS PART OF THE RECORD AND I HAVE IT FOR YOU TO  
8 TAKE, AND I'D REALLY APPRECIATE, MADAM CHAIRMAN, IF WE COULD  
9 HAVE SOME COUNSEL OPINION ON WHETHER THE COUNTY HAS COMPLIED  
10 WITH THE CALIFORNIA ENVIRONMENTAL QUALITY ACT. THIS IS SO  
11 IMPORTANT. WE BELIEVE THERE IS A CLEAR VIOLATION OF THAT ACT  
12 BECAUSE A COMPLETE ENVIRONMENTAL IMPACT REVIEW STUDY HAS NOT  
13 BEEN DONE ON THE REMOVAL OF THE 400-YEAR-OLD OAK TREE, OLD  
14 GLORY.

15

16 **SUP. BURKE, CHAIR:** WELL THERE WILL BE A -- THERE WILL BE A,  
17 THIS RELATES TO THE AREA BETWEEN MAGIC MOUNTAIN AND -- WHAT IS  
18 THIS CROSS STREET? BUT ANYWAY, THERE WILL BE A REPORT ON THAT  
19 BY THE COUNTY COUNSEL AT THE TIME ON MARCH WHEN WE HAVE THAT  
20 HEARING. THANK YOU VERY MUCH.

21

22 **DEAN FRANCOIS:** AND WE'LL BE ABLE TO REVIEW OLD GLORY AT THAT  
23 TIME?

24



**The Meeting Transcript of  
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1   **SUP. BURKE, CHAIR:** NO. WE WILL BE REVIEWING THE ITEM YOU'RE  
2   SPEAKING ON, THERE WILL BE A STATEMENT FROM THE COUNTY COUNSEL  
3   ON WHETHER IT'S APPROPRIATE FOR US TO VOTE ON THAT MATTER AND  
4   IT RELATES SPECIFICALLY TO THE ITEM YOU'RE VOTING ON.

5

6   **DEAN FRANCOIS:** BUT CAN WE GET ANY OPINION AT ALL AS TO WHETHER  
7   WE'RE IN COMPLIANCE WITH SEQUA BECAUSE?

8

9   **SUP. BURKE, CHAIR:** THE COURT HAS A RIGHT TO DIRECT US TO DO  
10   ANYTHING, WE HAVE ALREADY VOTED ON THAT, BUT THE COURT CAN  
11   CHANGE MANY RIGHTS OF OTHER PEOPLE WILL BE AFFECTED, OLD  
12   GLORY'S RIGHTS, BUT THE RIGHTS OF OTHER PEOPLE ALSO WHO HAVE  
13   VESTED PROPERTY INTERESTS, SO THE ONLY WAY WE CAN DISCUSS THAT  
14   IS IF THE COURT DIRECTS US TO. WE THANK YOU FOR YOUR INTEREST  
15   AND WE UNDERSTAND YOUR COMMITMENT, BUT WE HAVE A LOT OF THINGS  
16   WE HAVE TO MOVE FORWARD WITH.

17

18   **DEAN FRANCOIS:** THANK YOU VERY MUCH FOR ALLOWING ME TO BE  
19   HEARD. IT'S A SHAME THE OTHER TWO PEOPLE WERE TOLD THAT THEY  
20   COULD NOT SPEAK AND THEY LEFT. THANK YOU VERY MUCH.

21

22   **SUP. BURKE, CHAIR:** THEY CAN SPEAK ON THE 24th.

23

24   **DEAN FRANCOIS:** OKAY.

25



**The Meeting Transcript of  
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1   **SUP. BURKE, CHAIR:** ALL RIGHT, 25th I'M SORRY. ALL RIGHT,  
2   SUPERVISOR ANTONOVICH, WOULD YOU GO ON WITH YOUR MOTIONS?

3

4   **SUP. ANTONOVICH:** FOR NEXT WEEK, I WOULD LIKE TO MOVE THE  
5   FOLLOWING MOTION. ON JANUARY 25th, A 15 MONTH OLD CHILD WAS  
6   FOUND IN THE WATER UNCONSCIOUS AT BERNALLY PARK. FORTUNATELY  
7   THE YOUNG BOY SURVIVED BUT IS LISTED IN CRITICAL CONDITION.  
8   IT'S BEEN REPORTED THAT WHILE THE L.A. COUNTY FIRE DEPARTMENT  
9   RESPONDED TO THE SCENE, THE LAKE LIFEGUARDS WERE NOT NOTIFIED  
10   OF THE INCIDENT. IT'S IMPERATIVE THAT ALL OF THE PUBLIC SAFETY  
11   AGENCIES THAT SERVE OUR PARKS MAINTAIN OPEN LINES OF  
12   COMMUNICATION, ENSURING EFFECTIVE AND EFFICIENT COMMUNICATION  
13   TO PROTECT THOSE WHO USE THE FACILITY. SO I'D MOVE THAT THE  
14   BOARD DIRECT THE DEPARTMENT OF PARKS AND REC AND THE L.A.  
15   COUNTY FIRE TO INVESTIGATE AND REPORT BACK IN 45 DAYS WITH  
16   INFORMATION ON HOW WE CAN DEVELOP A PROTOCOL TO IMPROVE THE  
17   COMMUNICATION BETWEEN PUBLIC SAFETY AGENCIES THAT SERVE THE  
18   PARK.

19

20   **SUP. BURKE, CHAIR:** MOVED BY ANTONOVICH, SECONDED BY KNABE.  
21   WITHOUT OBJECTION, SO ORDERED.

22

23   **SUP. ANTONOVICH:** AND THEN ON -- ISSUE ON VEHICLE LICENSE TAX,  
24   SOMEHOW THERE WAS A MISCOMMUNICATION THAT'S BEEN REPORTED ON  
25   THE RADIO AND TELEVISION THAT THE BOARD OF SUPERVISORS HAVE





**The Meeting Transcript of  
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1 SUPPORTED THE TAX AND IN DISCUSSING THIS WITH MR. JANSSEN  
2 YESTERDAY, I SUGGESTED I CLARIFY THE ISSUE. AT NO TIME HAS THE  
3 BOARD OF SUPERVISORS VOTED TO RESTORE THE VEHICLE LICENSING  
4 FEE TAX, WHAT THE BOARD OF SUPERVISORS' ACTIONS HAS BEEN IS  
5 ASKING THE STATE TO ABIDE BY ITS COMMITMENT THAT THOSE FUNDS  
6 WOULD BE FULLY PROTECTED AND ALL CITIES AND COUNTIES WOULD  
7 RETAIN THOSE REVENUES AS COMMITTED BY THE STATE WHEN THEY MADE  
8 THE CHANGES IN THE LEGISLATION A COUPLE YEARS AGO, WAS NOT  
9 ASKING FOR A TAX INCREASE TO REPLACE THOSE REVENUES, BUT TO  
10 USE EXISTING FUNDS TO MAKE UP FOR THAT DEFICIT. AND THEN ON  
11 ANOTHER ISSUE THIS MORNING ON THE --

12

13 **SUP. BURKE, CHAIR:** COULD THE C.A.O. --

14

15 **JANSSEN:** ALL RIGHT WE CAN'T, SUPERVISOR ANTONOVICH, IT WAS MY  
16 UNDERSTANDING THAT YOU WERE GOING TO CLARIFY THAT YOU DID NOT  
17 SUPPORT THE REINSTATEMENT OF THE FEE BUT THE BOARD ACTION, THE  
18 SECOND PART OF THE BOARD ACTION SUPPORTED --

19

20 **SUP. ANTONOVICH:** WAS SPECIFICALLY STATED THAT WE DID NOT --

21

22 **JANSSEN:** SUPPORTED 4-X IN CLARIFYING WHO IS RESPONSIBLE FOR  
23 PULLING THE TRIGGER THAT WOULD LEAD TO. SO THE BOARD HAS TAKEN  
24 A POSITION ON 4-X.

25



**The Meeting Transcript of  
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1   **SUP. ANTONOVICH:** THE BOARD HAS TAKEN A POSITION THAT THE  
2   VEHICLE LICENSE FEE IS TO REMAIN WHOLE. THE BOARD DID NOT TAKE  
3   THE POSITION, IT WAS NOT PRESENTED TO THE BOARD THAT ANY  
4   SUPPORT RETAINING A WHOLENESS OF THE TAX OR OF THE FEE WOULD  
5   INCREASE THOSE FEES BY ACTIONS OF ANY LEGISLATION. WE WERE  
6   TOLD SPECIFICALLY, AND IF YOU CAN GO BACK ON THE AGENDA, THAT  
7   WE WERE TALKING ABOUT NOT BREAKING THE COMMITMENT THAT THE  
8   STATE OF CALIFORNIA HAD MADE WHEN THAT REFORM WAS ADOPTED TWO  
9   TO THREE YEARS AGO.

10

11   **SUP. BURKE, CHAIR:** SUPERVISOR ANTONOVICH, I THINK I UNDERSTAND  
12   WHAT YOU'RE SAYING, IS THAT WE WANT TO ABIDE BY WHAT WAS THE  
13   COMMITMENT BEFORE,

14

15   **SUP. ANTONOVICH:** YES.

16

17   **SUP. BURKE, CHAIR:** WHICH WAS EITHER TO RESTORE V.L.F. OR TO  
18   MAINTAIN THE BACKFILL. BUT WE WILL GET, FOR ANYONE WHO'S  
19   INTERESTED, A COPY OF WHAT WE ACTUALLY VOTED ON FOR THEM TO  
20   LOOK AT, BUT THAT'S BASICALLY WHAT WE AGREED, THAT WE WANTED -  
21   - WE WANT THE REVENUES FROM V.L.F. AS THEY EXISTED PRIOR TO  
22   THE ROLL BACK.

23

24   **SUP. ANTONOVICH:** YES, YES, THAT'S TRUE. ALL RIGHT, THEN THIS  
25   MORNING, ON THE FRONT PAGE OF THE DAILY NEWS, WAS A VERY



**The Meeting Transcript of  
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1 SHOCKING STORY WHICH FOLLOWED UP ON A STORY OF LAST WEEK, AND  
2 THIS WAS A COMPANY THAT THE METROPOLITAN TRANSIT AUTHORITY  
3 SUED IN COURT FOR FRAUD, BASICALLY, AND WAS AWARDED A 60-  
4 MILLION-DOLLAR JUDGMENT AND THAT WAS AGAINST TUDOR-SALIBA, AND  
5 HERE WE FIND THAT THIS L.A. UNIFIED SCHOOL DISTRICT IS NOW  
6 GOING TO BE AWARDING THIS COMPANY A 36-MILLION-DOLLAR CONTRACT  
7 AND WE FOUND OUT LAST WEEK THAT THE CITY OF LOS ANGELES GAVE  
8 THEM NEARLY A 34-MILLION-DOLLAR CONTRACT TO BUILD A VAN NUYS  
9 TRANSIT TERMINAL. BUT ACCORDING TO THE SUPERIOR COURT JUDGE  
10 AND THE RULING AGAINST THIS COMPANY FOR THE FRAUD THAT WAS  
11 COMMITTED IN THE METROPOLITAN TRANSIT AUTHORITY SUBWAY  
12 PROJECT, JUDGE KALEN STATED SPECIFICALLY, AND I QUOTE, THAT  
13 THEY "INTENTIONALLY CONCEALED, WITHHELD, DESTROYED RECORDS AND  
14 DOCUMENTS RELEVANT AND CRUCIAL TO THE TRIAL", AND THAT CASE IS  
15 NOW BEING APPEALED, BUT IT SEEMS TO ME THAT WITH THE CITY OF  
16 LOS ANGELES AND THE L.A. UNIFIED DISTRICT ARE REALLY ON A  
17 SLIPPERY SLOPE WHEN THEY AWARD THESE MULTI-MILLION-DOLLAR  
18 CONTRACTS TO A COMPANY THAT HAS HAD A RECORD OF COST OVERRUNS  
19 AND SHADY BUSINESS DEALINGS IN THE PAST. SO THAT'S THE ONLY  
20 ISSUES I HAVE TODAY, MADAM CHAIR.

21

22 **SUP. BURKE, CHAIR:** ALL RIGHT. I MOVE THAT WHEN WE ADJOURN  
23 TODAY, WE ADJOURN IN MEMORY OF NELL CARTER, THE  
24 ACTRESS/SINGER, WHO PASSED AWAY AT AGE 54, THE STAR OF THE  
25 1980 SITCOM "GIVE ME A BREAK" AND RECEIVED A TONY IN 1978 FOR



**The Meeting Transcript of  
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1 THE BROADWAY MUSICAL "AIN'T MISBEHAVING." SHE'S SURVIVED BY  
2 HER DAUGHTER, TRACEY, AND TWO ADOPTED 13 YEAR OLD SONS, JOSHUA  
3 AND DANIEL. AND LUCINDA WELCH, A LONG-TIME RESIDENT OF THE  
4 SECOND DISTRICT.

5

6 **SUP. ANTONOVICH:** ALSO, SHE PARTICIPATED IN MANY PROGRAMS HERE  
7 AT THE BOARD OF SUPERVISORS --

8

9 **SUP. BURKE, CHAIR:** YES SHE DID.

10

11 **SUP. ANTONOVICH:** AS MISTRESS OF CEREMONIES AND ALSO BEING  
12 AWARDED DIFFERENT PROCLAMATIONS, SO I'D SUGGEST ALL BOARD  
13 MEMBERS BE ON THAT.

14

15 **SUP. BURKE, CHAIR:** ALL MEMBERS.

16

17 **SUP. KNABE:** YEAH I'LL JUST ADD THAT I'M ON THE BOARD OF THE  
18 INTERNATIONAL CITY THEATRE IN LONG BEACH, AND SHE WAS TO OPEN  
19 A WEEK FROM FRIDAY NIGHT STARRING IN THE BROADWAY SHOW,  
20 "RAISIN," AND SHE WAS AT -- ACTUALLY AT REHEARSAL THE DAY SHE  
21 PASSED AWAY. SO SHE'LL BE MISSED.

22

23 **SUP. BURKE, CHAIR:** SO ALL MEMBERS. SO ORDERED. I HAVE THREE  
24 ITEMS I WOULD LIKE TO INTRODUCE AND THEN I'LL CALL UP ITEM  
25 NUMBER 9. THE L.A. UNIFIED SCHOOL DISTRICT, TYPICALLY THESE



**The Meeting Transcript of  
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1 DISTRICTS THAT HAVE LARGER INNER CITY DISTRICTS THAT SERVE  
2 LOWER INCOME PEOPLE, THEY HAVE SUCH NEED FOR FUNDING. AB 31  
3 RUNNER WILL -- THIS LEGISLATION WILL REDUCE FUNDING TO SCHOOL  
4 DISTRICTS THAT HAVE A HIGHER NUMBER OF EXCUSED ABSENCES. SO  
5 FOR NEXT WEEK, I'M PUTTING ON THAT THE BOARD OF SUPERVISORS  
6 OPPOSE AB 31 RUNNER AND DIRECT THE EXECUTIVE OFFICER TO SEND A  
7 LETTER COMMUNICATING SUCH OPPOSITION TO THE GOVERNOR. THIS IS  
8 FOR NEXT WEEK. ALSO FOR NEXT WEEK, THAT WE -- WE'VE REVIEWED  
9 THE PROPOSAL TO ADD THE BILLBOARD EXCLUS-- ADDENDUM TO  
10 IDENTIFY ZONES IN THE SOUTHWEST ZONE DISTRICT. THE PROPOSAL  
11 WAS INITIATED BY OUR OFFICE TO ADDRESS COMPLAINTS BY BEL AIR  
12 AND WISEBURN RESIDENTS REGARDING THEIR CONCERNS OVER THE  
13 PROLIFERATION OF BILLBOARDS IN THESE COMMUNITIES. A FAVORABLE  
14 RECOMMENDATION WAS MADE BY THE REGIONAL PLANNING COMMISSION.  
15 AND I WOULD PUT ON FOR -- I'M SORRY. THIS IS ON ITEM 9. I  
16 PICKED UP THE WRONG THING. FOR NEXT WEEK, I WANT TO ADDRESS  
17 THE ISSUE IN TERMS OF THE GANG VIOLENCE ISSUE AND TO DIRECT  
18 THE LOS ANGELES COUNTY INTERAGENCY GANG TASK FORCE, A  
19 SUBCOMMITTEE OF THE COUNTYWIDE CRIMINAL JUSTICE COORDINATING  
20 COMMITTEE TO DEVELOP A REPORTING MODEL TO FOCUS ON ACCURATE,  
21 CONSISTENT STATISTICS OF ALL GANG-RELATED CRIMES AND TO HIGHLY  
22 ENCOURAGE ALL JURISDICTIONS WITHIN THE COUNTY TO PARTICIPATE.  
23 I KNOW WE ALL READ THE ARTICLE IN THE LOS ANGELES TIMES THAT  
24 SAID THERE WAS NO STANDARDIZED REPORTING. I BELIEVE IN THE  
25 COUNTY OF LOS ANGELES, WE GET VERY DETAILED REPORTING. WE GET



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1 REPORTING OF EVERY INCIDENT OF WHERE THERE'S A GANG DEATH WITH  
2 IDENTIFICATION OF THE IDENTIFIED GANG THAT THEY BELIEVE  
3 INVOLVED AND THE PEOPLE WHO ARE THE VICTIMS AND ALSO A MAP,  
4 BUT APPARENTLY THIS IS NOT DONE ACROSS THE COUNTY, AND SO WE  
5 WOULD ASK THAT THERE BE SOME KIND OF BETTER STATISTICS. THIS  
6 WILL BE ON FOR NEXT WEEK. AND FINALLY, E.M.S. IS A LIFE SAVING  
7 SERVICE THAT IS HIGHLY SPECIALIZED, COMPLEX, AND VERY  
8 IMPORTANT TO THE PUBLIC. AND THIS IS OF COURSE THE STATE  
9 EMERGENCY MEDICAL SERVICES. THE STATE E.M.S. AUTHORITY IS  
10 CHARGED WITH COORDINATING A COMPLICATED SYSTEM OF EMERGENCY  
11 AND DISASTER-RELATED MEDICAL CARE THROUGHOUT THE STATE. AND  
12 PRIOR TO THE DEVELOPMENT OF THE E.M.S. AUTHORITY, EMERGENCY  
13 MEDICAL SERVICE DELIVERY LACKED CONSISTENCY, STABILITY, AND  
14 EFFECTIVE OVERSIGHT. FOR NEXT WEEK, I WILL BE MOVING THAT THE  
15 BOARD SUPPORT THE RETENTION OF THE STATE E.M.S. AUTHORITY AS A  
16 SEPARATE STATE DEPARTMENT AND INSTRUCT THE EXECUTIVE OFFICER  
17 SEND A 5-SIGNATURE LETTER TO CONVEY THIS POSITION TO THE  
18 GOVERNOR, THE ASSEMBLY SPEAKER, THE SENATE PRESIDENT PRO TEM  
19 AND THE MINORITY LEADER OF BOTH HOUSES. THAT'S FOR NEXT WEEK.  
20 BUT NOW I'D LIKE TO CALL UP ITEM NUMBER 9. I'LL CALL 10 FIRST,  
21 NOW. IS IT 10 THAT'S AT THE BILLBOARD?

22

23 **SUP. ANTONOVICH:** NINE IS THE BILLBOARD. NINE IS THE BILLBOARD.

24





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1   **SUP. BURKE, CHAIR:** NINE IS THE BILLBOARD. WAS IT PASSED  
2   ALREADY? ALL RIGHT. I'M GOING TO -- ALL RIGHT, ITEM 13, WE'LL  
3   CALL UP. DID ANYONE ASK TO SPEAK ON 13? WE HAVE A NUMBER OF  
4   PEOPLE WHO HAVE ASKED TO SPEAK ON 13. WHAT HAPPENED ON 10? WAS  
5   THAT -- IT WAS HELD, AND SO THE MOTION SHOULD HAVE BEEN ON 10  
6   THAT I SAID FOR NEXT WEEK. ALL RIGHT. THAT'S RIGHT. I BETTER  
7   GO BACK. I'LL GO BACK TO 10. AND THEN WE'LL CALL THE PEOPLE ON  
8   13. ON 10, SUPERVISOR ANTONOVICH, I BELIEVE THAT'S YOUR  
9   MOTION. AND THEN I HAD AN AMENDMENT. OKAY. SUPERVISOR  
10  ANTONOVICH, ON ITEM NUMBER 10, I'LL CALL IT UP THEN.

11

12  **SUP. ANTONOVICH:** OKAY, ON ITEM NUMBER 10, WHAT WE HAVE IS THIS  
13  LEGISLATION PROVIDES \$203 MILLION IN THE FISCAL YEAR TO  
14  EQUALIZE PER PUPIL FUNDING, BECAUSE WE FIND THAT THERE ARE  
15  MANY SMALLER SCHOOL DISTRICTS FROM COMPTON TO PASADENA, TO  
16  ANTELOPE VALLEY, LYNWOOD, THROUGHOUT THIS COUNTY WHO ARE NOT  
17  ABLE TO PARTICIPATE IN THESE FUNDS THAT ARE AVAILABLE FOR  
18  DISTRICTS THAT HAVE LOW-INCOME STUDENTS. SO WHAT WE'RE TRYING  
19  TO DO IS NOT TO TAKE MONEY AWAY FROM THE COUNTIES, BUT THE  
20  FUNDS THAT ARE AVAILABLE THAT WILL BE DISTRIBUTED BY THE  
21  STATE, THAT THEY BE DISTRIBUTED TO THOSE DISTRICTS THAT HAVE  
22  THE POORER STUDENTS TO MAKE UP FOR THEIR ADDITIONAL  
23  EDUCATIONAL PROGRAMS THAT WILL BE USED FOR THEM. SO THIS  
24  APPLIES TO ALL DISTRICTS BECAUSE ALL DISTRICTS HAVE THOSE



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1 STUDENTS WHO COME FROM POOR FAMILIES AND BACKGROUNDS. THAT'S  
2 THE INTENT OF THAT LEGISLATION.

3

4 **SUP. BURKE, CHAIR:** AND SUPERVISOR KNABE, AND THEN I WILL  
5 INTRODUCE MY SUBSTITUTE --

6

7 **SUP. KNABE:** I HAVE NO PROBLEM WITH THE INTENT OF THE  
8 LEGISLATION AND HOW IT DIRECTS ITS FUNDING FORMULAS. I SUPPORT  
9 THAT PORTION OF IT. MY CONCERN IS THIS, SUPERVISOR ANTONOVICH,  
10 IS THAT SUPPOSEDLY THERE WAS \$203 MILLION SET ASIDE TO BE  
11 SPENT ON SOME FORMULA BASIS. OUR ORIGINAL REPORT SAID THEY  
12 ONLY HAD 140 IN THEIR TRUST FUND, SO THERE'S A 60-MILLION-  
13 DOLLAR GAP.

14

15 **SUP. ANTONOVICH:** THEN IT SHOULD BE 140 MILLION, IT SHOULD BE  
16 WHATEVER THE AMOUNT THAT THEY PUT ASIDE SHOULD BE EQUALLY  
17 DISTRIBUTED, I'M NOT SAYING THAT THERE'S A FIXED NUMBER.

18

19 **SUP. KNABE:** RIGHT AND THEIR UPDATED REPORT, THEN, WAS -- SAID  
20 THERE'S ONLY 43 MILLION DOLLARS SET ASIDE, SO THAT'S A GAP OF  
21 160, SO IF YOUR MOTION WOULD READ THAT SUPPORT AB 31 AND  
22 WHATEVER THE TRUST FUND AMOUNT IS, 43 MILLION, I'LL SUPPORT  
23 IT.

24



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1    **SUP. ANTONOVICH:** THAT'S THE INTENT IS AND THAT'S WHAT I WOULD

2    --

3

4    **SUP. BURKE, CHAIR:** ALL RIGHT. I HAVE A SUBSTITUTE MOTION THAT  
5    I READ SAYING THAT I WAS INTRODUCING FOR NEXT WEEK, BUT  
6    BASICALLY WHAT IT WOULD SAY IS THAT WE OPPOSE RUNNERS, AB 31,  
7    AND LET'S CALL THE ROLE ON THAT ITEM, ON THE SUBSTITUTE MOTION  
8    TO OPPOSE 31 INSTEAD OF SUPPORTING IT.

9

10   **CLERK VARONA-LUKENS:** ALL RIGHT. AND MADAM CHAIR, I'M SORRY, I  
11   DIDN'T GET THE SECOND.

12

13   **SUP. BURKE, CHAIR:** WAS THERE A SECOND TO MY SUBSTITUTE MOTION  
14   TO OPPOSE IT?

15

16   **SUP. YAROSLAVSKY:** I'LL SECOND IT.

17

18   **SUP. BURKE, CHAIR:** ALL RIGHT, IT WAS SECONDED BY YAROSLAVSKY.

19

20   **CLERK VARONA-LUKENS:** OKAY, SUPERVISOR MOLINA.

21

22   **SUP. MOLINA:** YEA.

23

24   **CLERK VARONA-LUKENS:** SUPERVISOR YAROSLAVSKY.

25



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1     **SUP. YAROSLAVSKY:** YES.

2

3     **CLERK VARONA-LUKENS:** SUPERVISOR KNABE.

4

5     **SUP. KNABE:** NO.

6

7     **CLERK VARONA-LUKENS:** SUPERVISOR ANTONOVICH.

8

9     **SUP. ANTONOVICH:** NO.

10

11    **CLERK VARONA-LUKENS:** AND SUPERVISOR BURKE.

12

13    **SUP. BURKE, CHAIR:** YEA.

14

15    **CLERK VARONA-LUKENS:** YES.

16

17    **SUP. BURKE, CHAIR:** SORRY FOR THE CONFUSION ON THAT. ALL RIGHT,

18    WE'LL GO TO 13, WE HAVE A NUMBER OF PEOPLE WHO'VE ASKED TO

19    SPEAK. ONE PERSON SAYS THEY'LL ONLY SPEAK IF THERE ARE

20    QUESTIONS, SO WE WON'T CALL ON YOU BECAUSE I DON'T KNOW THAT -

21    - AZEEM MOHAMMAD.

22

23    **AZEEM MOHAMMAD:** RIGHT HERE.

24



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1   **SUP. BURKE, CHAIR:** PLEASE COME FORWARD. TED HAYES AND JEFFREY  
2   PENINGER. DID THEY COME FORWARD?

3

4   **SPEAKER:** THEY'RE COMING FORWARD.

5

6   **SUP. BURKE, CHAIR:** ALL RIGHT. MR. HAYES, DO YOU WANT TO START?  
7   AND THEN JEFFREY PENINGER. ARE YOU JEFFREY PENINGER?

8

9   **TED HAYES:** NO, MA'AM. JEFFREY'S MISSING IN ACTION I GUESS  
10   RIGHT NOW, HE'LL BE HERE.

11

12   **SUP. BURKE, CHAIR:** AZEEM MOHAMMAD. ALL RIGHT.

13

14   **TED HAYES:** MADAM SUPERVISOR, I HAVE SOME DOCUMENTS AND SOME  
15   PHOTOGRAPHS TO GIVE TO YOU ABOUT WHAT WE'RE TALKING ABOUT THIS  
16   MORNING AND SOME LITERATURE IN THE BACK WITH OUR REQUEST.  
17   WHILE WE AGREE WITH MR. ANTONOVICH'S MOTION OR RECOMMENDATION  
18   THAT THE CITY OF LOS ANGELES CLEAN THE TOILETS TWICE DAILY AND  
19   TO, IN FACT, WORK TOWARDS GETTING THOSE SELF-CLEANING TOILETS,  
20   WE SUPPORT THAT, EXCEPT THAT WE WOULD LIKE FOR YOU TO ADD TO  
21   THAT MOTION, RECOMMENDATION, THAT THE TOILETS BE SUPERVISED ON  
22   A 24-HOUR BASIS. I HAVE A DOCUMENT THAT I'VE GIVEN TO THE CITY  
23   OF LOS ANGELES, AND I CAN GIVE YOU THE SAME COPY, AS TO HOW  
24   THAT IS TO BE DONE. EVEN IF YOU'LL DO FURTHER RESEARCH, THE  
25   TOILETS UP IN SAN FRANCISCO, BECAUSE THEY DIDN'T HAVE



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1 SUPERVISION, THEY WERE TRASHED AND THEY WERE DESTROYED, AND WE  
2 DON'T WANT THAT TO HAPPEN HERE. SO WE AGREE WITH YOU THERE,  
3 BUT PLEASE, WE'RE ASKING THAT YOU WOULD RECOMMEND ALSO  
4 SUPERVISION. ALSO, YOU'LL NOTICE IN THE DOCUMENT I GAVE YOU,  
5 CALLED "SHUT IT DOWN," WE WOULD LIKE FOR YOU -- WE'RE ASKING  
6 THAT YOU WOULD CITE THE CITY OF LOS ANGELES FOR RUNNING AN  
7 ILLEGAL OUTDOOR SHELTER AND FOR THOSE UNSAFE AND UNSANITARY  
8 TOILETS. IF MY ORGANIZATION RAN SUCH A FACILITY, YOUR COUNTY  
9 HEALTH DEPARTMENT WOULD FINE ME, SHUT ME DOWN UNTIL I  
10 CORRECTED THE PROBLEM. YOU NEED TO DO THE SAME THING TO THE  
11 CITY OF LOS ANGELES. WE WOULD LIKE FOR YOU TO CITE THEM TODAY,  
12 THIS DAY, PLEASE. ALSO, I'M CALLING ON YOU, PARTICULARLY ON  
13 THE LEADERSHIP OF YAROSLAVSKY, ANTONOVICH, AND KNABE, THAT YOU  
14 WOULD INVESTIGATE, EITHER DIRECTLY OR BY A GRAND JURY  
15 INVESTIGATION, MY CLAIMS THAT THE ADVOCATES AND THE ACTIVISTS  
16 WHO HAVE DRIVEN POLICY TO YOUR DEPUTIES AROUND HOMELESSNESS  
17 HAVE BEEN BASICALLY RACIST. I'VE POINTED OUT TO YOU BEFORE  
18 THAT 80 TO 85% OF THE HOMELESS POPULATION IN THE DOWNTOWN SKID  
19 ROW AREA ARE BLACK MALES, AFRICAN-AMERICAN MALES, WHEREAS 99%  
20 OF THE POLICY MAKERS AROUND THE ISSUE ARE UPPER MIDDLE CLASS  
21 WHITE PEOPLE. IT'S NOT THAT THEY'RE NECESSARILY BAD, BUT THEY  
22 JUST DON'T HAVE THE PASSION THAT SOMEONE LIKE MYSELF OR MY  
23 BROTHER HERE WOULD HAVE IN DEALING WITH THAT, AND IF YOU WILL  
24 INVESTIGATE, YOU'LL FIND THE REASON THAT WE ARE HERE TODAY ON  
25 THIS ISSUE OF TOILETS, ON THIS ISSUE OF SIDEWALK ENCAMPMENTS,





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1 IS BECAUSE OF THE RACIST POLICIES OF THESE SO-CALLED HOMELESS  
2 ADVOCATES AND ACTIVISTS WHO HAVE SUCCESSFULLY, OVER THE LAST  
3 18 YEARS, BEEN ABLE TO LOCK OUT MYSELF AND OTHER BLACK AND  
4 BROWN PEOPLE FROM HAVING SAY IN THE POLICY MAKING. SO WE WOULD  
5 DEEPLY APPRECIATE THAT ACTION FROM YOU, IF AT ALL POSSIBLE.

6

7 **SUP. BURKE, CHAIR:** ALL RIGHT. MR. MOHAMMAD.

8

9 **AZEEM MOHAMMAD:** YES. THANK YOU FOR ALLOWING ME THE OPPORTUNITY  
10 TO SAY A FEW WORDS. NUMBER ONE, WE WORK IN SKID ROW HELPING  
11 THE HOMELESS. MANY TIMES, YOU NICE PEOPLE THAT HAVE GOOD  
12 PORCELAIN FACILITIES AT YOUR HOME DON'T EVEN COME CLOSE TO  
13 UNDERSTANDING WHAT THE SITUATIONS ARE ON SKID ROW WITH USING A  
14 REST ROOM FACILITY. WITH YOUR NICE PORCELAIN FACILITIES AT  
15 HOME, I PERSONALLY WOULD LIKE TO CHALLENGE EACH ONE OF YOU TO  
16 COME AND SPEND A 48-HOUR PERIOD DOWN AND SEE EXACTLY WHAT  
17 HAPPENS WHEN YOU GOT TO USE SOME REST ROOM FACILITIES AND YOU  
18 DON'T HAVE A PLACE TO GO. NOW I DON'T HAVE ANYTHING AGAINST  
19 ANY ONE OF YOU. MAY GOD BLESS YOU FOR THE SITUATIONS YOU LIVE  
20 IN. BUT IN ORDER TO UNDERSTAND THE PROBLEM, COME DOWN AND LIVE  
21 WITH THE PEOPLE WITH THE PROBLEM. PUT YOURSELF ON THE LINE FOR  
22 A DAY. WE NEED THE TOILET FACILITIES NOW AND WE NEED IT  
23 SUPERVISED BY PEOPLE THAT'S HOMELESS. EMPOWER TO DO SOMETHING.  
24 EMPOWER THE FACILITY. THE BACTERIA LEVEL IS HIGHER IN THIS  
25 CITY THAN ANY OTHER CITY IN THE NATION. TWICE AS MUCH AS THE



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1 ONE UP UNDER THEM, ON THE SIDEWALKS DOWN HERE. YOU CAN DO  
2 SOMETHING. DO IT NOW.

3

4 **SUP. BURKE, CHAIR:** ALL RIGHT. THANK YOU VERY MUCH. WE'LL NOW  
5 HAVE THOSE SEATS TAKEN BY CARL POPULUS, TED HAYES AND AKEIL,  
6 OR AKILY. WOULD YOU PLEASE TAKE THOSE SEATS? PLEASE COME  
7 FORWARD. CARL POPULACE, TED HAYES, AND AKILY. TRY IT AGAIN.  
8 ALL RIGHT. TED HAYES.

9

10 **SPEAKER:** THANK YOU, MEMBERS OF THE COMMITTEE, SUPERVISORS. I  
11 AM A MEMBER OF THE LOS ANGELES HOMELESS SERVICE AUTHORITY AND  
12 I AM A HOMELESS MEMBER OF THAT ADVISORY BOARD. THE UGLY FACE  
13 OF CAPITALISM HAS REARED ITS HEAD AS TOM GILMORE, AND HE  
14 INSISTS HE'D LIKE TO LEAD THE CAMPAIGN TO DEAL WITH THE  
15 TOILETS. I KNOW YOU FEEL THAT'S A VERY WARM RECOMMENDATION  
16 FROM MR. GILMORE, BUT THE FACT IS, THESE PORTABLE TOILETS COST  
17 \$400 OFF THE FACTORY FLOOR. THEY'RE THE CHEAPEST TOILETS YOU  
18 CAN POSSIBLY BUY. THAT MEANS THEY'RE MADE OF PLASTIC, AND THE  
19 CHEAPEST MATERIALS YOU CAN POSSIBLY BUY. THEY'RE NOT MADE TO  
20 ENDURE THE INSTITUTIONAL TYPE OF TREATMENT THAT THEY RECEIVE  
21 ON SKID ROW. THEY SPEND \$300,000 A YEAR CLEANING THESE  
22 TOILETS, MR. ANTONOVICH, EVERY MORNING AND EVERY EVENING. IT'S  
23 NOT CLEANLINESS. IT'S A FACT IT'S NOT A STRUCTURED DESIGN BUT  
24 A KIND OF TREATMENT IT GETS. MR. HAYES' PROGRAM, PROJECT,  
25 RECOMMENDATION TO HAVE THESE TOILETS SUPERVISED IS THE ONLY



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1 SANE THING YOU CAN POSSIBLY DO. YOU CANNOT DUMP THESE TOILETS  
2 ON THE STREET AND WALK AWAY, BUT THAT'S WHAT'S BEEN DONE. NOW,  
3 THERE'S A GOOD, LOGICAL REASON BEHIND DOING THAT BECAUSE IT'S  
4 A PICTURESQUE SCENE WHEN H.U.D. OR ANY OTHER GOVERNMENTAL  
5 AGENCY COMES HERE TO LOOK AT THE HOMELESS PLIGHT THEY GET TO  
6 SEE THESE TOILETS AND SEE THE PEOPLE AND SEE THE ACTIVITY AND  
7 PERHAPS THEY CAN FIND SOME WAY TO FIND SOME MONEY TO REMEDY  
8 IT, BUT IT WILL NEVER BE REMEDIED BECAUSE THERE'S A NEEDED  
9 EYESORE IN ORDER TO COLLECT MONEY FROM THE FEDERAL GOVERNMENT  
10 OR PASSIONATE PEOPLE WHO ARE RELIGIOUSLY BASED OR WHATEVER. SO  
11 IT'S A CONSPIRACY, IT'S A SCHEME TO SEE TO IT THAT THERE ARE  
12 HUMAN BEINGS LIVING IN THIS CONDITION, MERELY FOR THE SAKE OF  
13 SAYING "GIVE US MONEY." WELL, YOU'VE GOT MONEY. YOU HAD MONEY  
14 LONG AGO TO DEAL WITH THESE TOILETS. YOU'VE NOT DONE THAT. I  
15 HAVE BEEN ARRESTED FOR SIMPLY SITTING AT A TABLE IN AN EMPTY  
16 ROOM AT LASA. I JUST TOLD YOU, I'M A MEMBER OF THE ADVISORY  
17 BOARD. WHY WOULD THEY DO THAT? BECAUSE AS MR. HAYES HAS  
18 POINTED OUT, BLACK PEOPLE, BROWN PEOPLE GET NOTHING BUT  
19 DISRESPECT WHEN IT COMES TO TRYING TO DEAL WITH THE ISSUES  
20 THAT MANY HOLD PASSION FOR WITH HOMELESS PEOPLE. SO I WOULD  
21 ASK YOU TO RECOGNIZE THAT IT IS NOT CLEANLINESS, MR.  
22 ANTONOVICH, IT'S NEW, STABLE, INSTITUTIONAL-TYPE FACILITIES TO  
23 BEGIN WITH, AND CERTAINLY NOT A SAN FRANCISCO MODEL. THANK  
24 YOU.

25



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1    **SUP. BURKE, CHAIR:** THANK YOU. YES.

2

3    **CARL POPULACE:** GOOD MORNING COUNTY BOARD OF SUPERVISORS AND  
4    THE PUBLIC, THE GENERAL PUBLIC. I'M HERE AS I STATED BEFORE  
5    WHEN I WAS HERE.

6

7    **SUP. BURKE, CHAIR:** YOU MAY BE SEATED, MR. HAYES. YES.

8

9    **TED HAYES:** I WANT TO STAY WITH MY PEOPLE PLEASE.

10

11    **SUP. BURKE, CHAIR:** YOU MAY BE SEATED.

12

13    **TED HAYES:** I WANT TO STAY WITH MY PEOPLE PLEASE.

14

15    **SUP. BURKE, CHAIR:** WOULD YOU PLEASE GO ON AND SPEAK.

16

17    **TED HAYES:** I WANT A RESPONSE FROM YOU, I DON'T HAVE A  
18    RESPONSE.

19

20    **SPEAKER:** WHAT'S THE BIG DEAL HE'S STANDING UP. WHO CARES,  
21    BESIDES YOU?

22

23    **SUP. BURKE, CHAIR:** WELL I THINK HE'S BLOCKING HIS OWN CAMERAS.  
24    OKAY GO RIGHT AHEAD.

25



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1 **SPEAKER:** HE KNOWS HOW TO HANDLE THE MEDIA, YOU KNOW THAT.

2

3 **SUP. BURKE, CHAIR:** GO RIGHT AHEAD. GO RIGHT AHEAD.

4

5 **CARL POPULACE:** GOOD MORNING AGAIN, BOARD OF SUPERVISORS. I  
6 CAME DOWN HERE TO EXPRESS THE ISSUE OF THE HOMELESSNESS --

7

8 **SUP. BURKE, CHAIR:** PLEASE GIVE US YOUR NAME.

9

10 **CARL POPULACE:** POPULACE, MY NAME IS CARL POPULACE, I WEAR MANY  
11 HATS, FOUNDED MAN UNITED, ALSO A MEMBER OF THE BLACK COMMUNITY  
12 OF TASK FORCE VIETNAM VETERANS OF AMERICA AND IT'S NOT JUST  
13 THE HAT I WEAR, IT'S JUST PEOPLE WEAR A LOT OF THINGS, BUT DO  
14 WE WEAR THEM WELL. THIS HOMELESS ISSUE IS NOTHING NEW HERE IN  
15 LOS ANGELES. I'VE BEEN WORKING THIS SINCE 1975, NEVER ASKED  
16 FOR ANY GOVERNMENT FUNDING, ANY ASSISTANCE, I JUST BASICALLY  
17 TRIED TO GET OUT AND DO THE WORK. AND AS IS STATED IN THE  
18 NATIONAL HOMELESS PLAN, WHICH I SEE PEOPLE HAVE PICKED UP OFF  
19 OF HERE AND THERE AND TRIED TO WORK IT AND IT DIDN'T WORK  
20 BECAUSE THEY DIDN'T SIT DOWN IN COLLABORATION. THAT'S WHY I  
21 STATED THE LAST TIME I WAS HERE ABOUT THE A.I.D.S., MONEY, AND  
22 THE PROJECTS. IF EVERYBODY WOULD JUST GET ON THE SAME PAGE,  
23 WE'LL COME UP WITH THE SAME KIND OF REPORT CARDS. I'M OUT HERE  
24 IN THIS VENUE EVERY DAY, DOING THIS. YOU KNOW, MISS BURKE  
25 DOING ONE THING OR ANOTHER, THE HEALTH ISSUES THEY CUT, BUT I



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1 JUST THINK THAT THIS THING HAS GROWN SO MUCH, ESPECIALLY WITH  
2 THE PORTA POTTIES -- PORTA POTTIES AND ALL THIS STUFF, THIS  
3 POSES A GREAT HEALTH ISSUE, AND AT A TIME WHEN LOS ANGELES IS  
4 TALKING ABOUT BUDGET CUTS AND MONEY IS BEING MISSING, I'D LIKE  
5 TO STATE MYSELF THAT THESE VERY PEOPLE THAT WE ARE IGNORING  
6 AND WALKING OVER GOING TO OUR JOBS ON THESE SIDEWALKS, SOONER  
7 OR LATER, IT'S GOING TO BECOME A HEALTH ISSUE. AND THESE  
8 PEOPLE ARE GOING TO HAVE PNEUMONIA OR SOMETHING LIKE THAT. AND  
9 I JUST THINK IT'S ABOUT TIME FOR US TO REALLY GET ON THE SAME  
10 PAGE, LISTEN AT MR. HAYES, LISTEN OUT THERE AND LOOK AT,  
11 REVIEW THE NATIONAL HOMELESS PLAN AGAIN, ALL THE THINGS THAT  
12 WE'RE TALKING ABOUT NOW IS JUST AN ECHO OF WHAT WE TALKED  
13 ABOUT YESTERDAY, SO I CAME TO GIVE MY INPUT AND MY INPUT AND  
14 SUPPORT TO THIS ISSUE BECAUSE IT'S A VERY SERIOUS ISSUE AND  
15 IT'S NOT JUST A TED HAYES OR DOWNTOWN ISSUE NOW, IT'S IN  
16 COMMUNITIES ACROSS THIS STATE, SO THANK YOU VERY MUCH.

17

18 **SUP. BURKE, CHAIR:** ALL RIGHT. AS YOU AND MR. HAYES LEAVE,  
19 EMMANUEL DELEAGE AND KAREN JENKINS, PLEASE COME FORWARD.

20

21 **AKILE:** GOOD MORNING. THANK YOU FOR ALLOWING ME TO SPEAK. MY  
22 NAME IS AKILE, CHAIRMAN, KWANZAA PEOPLE OF COLOR, AND A  
23 SUPPORTER OF TED HAYES. NUMBER ONE, AS HE SAID, 85% OF THE  
24 PEOPLE DOWN THERE ARE BLACK. NUMBER TWO, THEY'RE BEING  
25 PRESSURED OUT OF THE DOWNTOWN AREA AS WE SPEAK AT THIS TIME BY





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1 L.A.P.D. POLICIES DIRECTED BY COUNCILWOMAN JAN PERRY. THESE  
2 PEOPLE, BECAUSE THEY'RE BEING PUSHED OUT, DOES NOT CHANGE THE  
3 REALITY. THEY STILL NEED A PLACE TO, WITH DIGNITY, USE THE  
4 BATHROOM. WITH DIGNITY, GET A DRINK OF WATER. WITH DIGNITY,  
5 KEEP THEMSELVES CLEAN, WITH DIGNITY, AND NOT HAVE TO BE  
6 WORRIED ABOUT BEING ARRESTED. WITH DIGNITY, LIVE THEIR LIVES.  
7 BECAUSE THEY DO NEED TO BE HELPED AS OPPOSED TO BEING PUSHED  
8 AROUND AND BANTERED AROUND. IT IS NOT THE SOLUTION. BUT WE DO  
9 NEED TO PUT OUR HEADS TOGETHER, TO COME UP WITH A SOLUTION.  
10 YES, WE UNDERSTAND THAT PORTABLE TOILETS ARE TEMPORARY, BUT  
11 MAYBE THERE IS SOMETHING MORE ORGANIC THAT WE CAN PUT INTO THE  
12 SURROUNDING COMMUNITY OF WHERE PEOPLE CAN HAVE ACCESS TO  
13 FACILITIES, WHETHER THEY BE PORTABLE OR OTHERWISE. AND INDEED,  
14 AS HAD BEEN SUGGESTED BY AN EARLIER SPEAKER, IT WOULD BE GOOD  
15 FOR US TO EMPOWER THE HOMELESS BECAUSE THEY'RE NOT STUPID.  
16 THEY CAN'T -- I WAS NOTING THE OTHER DAY, I WAS WALKING PAST  
17 THREE HOMELESS PEOPLE, AND EACH ONE OF THEM HAD A NEWSPAPER  
18 SITTING OUT THERE, AND I DON'T THINK THEY HAVE THE NEWSPAPER  
19 OUT THERE BECAUSE THEY NEEDED HEAT. THEY WERE READING THE  
20 PAPER. SO WE CAN INDEED DEVELOP A SOLUTION THAT WILL BE A WIN-  
21 WIN SOLUTION. AND IN CLOSING, I WANT TO STATE THAT DISEASE,  
22 CLEANLINESS, AND SAFETY ARE VERY IMPORTANT FACTORS FOR US ALL  
23 TO BE CONCERNED WITH BECAUSE WHAT AFFECTS THE BOTTOM --  
24  
25 **SUP. BURKE, CHAIR:** YOUR TIME IS UP. THANK YOU VERY MUCH.



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1

2 **AKILE:** -- DOES HAVE A WAY OF WORKING ITSELF TO THE TOP.

3

4 **SUP. BURKE, CHAIR:** ALL RIGHT, THANK YOU. EMMANUEL DELEAGE,  
5 KAREN JENKINS AND THEN WARREN WILLIAMS WILL BE OUR LAST  
6 SPEAKER. WE HAVE A SPECIAL ITEM SET FOR 11, BUT I'M GOING TO  
7 LET YOU CONCLUDE BEFORE GOING TO THE SPECIAL ITEM. WE HAVE  
8 WHEELCHAIR PEOPLE THAT ARE GOING TO HAVE TO BE CALLED.

9

10 **EMMANUEL DELEAGE:** YES, HI MY NAME IS EMMANUEL DELEAGE. GOOD  
11 MORNING, BOARD OF SUPERVISORS. I WILL BE VERY BRIEF. I SIMPLY  
12 WANT TO SAY AS A FRENCH-BORN AMERICAN CITIZEN, I WANT TO SAY  
13 THAT THE CONDITIONS ON SKID ROW I FIND ARE COMPLETELY  
14 APPALLING. IN FRANCE, THERE'S NO WAY THAT -- THERE ARE  
15 HOMELESS PEOPLE IN FRANCE, BUT YOU DO NOT SEE A PLACE LIKE  
16 SKID ROW WHERE SO MANY PEOPLE GATHER. AND ONE THING THAT I  
17 FIND QUITE AMAZING IS THAT THERE'S A PORT-A-TOILET ON SIXTH  
18 STREET RIGHT IN THE SAME BLOCK AS THE POLICE STATION AND  
19 COUNTLESS TIME WORKING DOWN THERE SINCE 1996, I HAVE SEEN  
20 AMBULANCES COME ON THAT SAME BLOCK THAT THE POLICE STATION IS  
21 AT, PRY THE DOOR OPEN TO PULL SOMEBODY OUT WHO HAS O.D.'d.  
22 THESE TOILETS NEED TO BE SUPERVISED. AND I WOULD, AGAIN,  
23 STRONGLY ENCOURAGE YOU TO WORK WITH MR. HAYES AND THE NATIONAL  
24 HOMELESS PLAN TO REMEDY THIS, NOT ONLY THE PORTA-TOILET  
25 SITUATION BUT LONGER-TERM, THE HOMELESS SITUATION. THANK YOU.



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1

2 **KAREN JENKINS:** GOOD MORNING. MY NAME IS KAREN JENKINS, AND I  
3 THANK YOU FOR THE OPPORTUNITY TO SPEAK. PRAISE GOD I'M NOT  
4 HOMELESS, AND I CAN ONLY IMAGINE WHAT IT'S LIKE, TO HAVE  
5 INADEQUATE SANITATION IS BEYOND MY FATHOM. I MEAN, HOW MANY  
6 TIMES HAVE YOU HAD A TOILET AT HOME BACK UP AND YOU KNOW HOW  
7 INCONVENIENT, NOT TO SAY UNSANITARY THAT IS. THESE PEOPLE LIVE  
8 WITH THIS ON A DAILY BASIS. WE NEED TO DO SOMETHING. TED HAYES  
9 SUGGESTS THAT HE MEET WITH YOU GUYS AND MAYBE YOU GUYS CAN  
10 WORK SOMETHING OUT. I IMPORE YOU TO MEET WITH HIM. I'M NOT  
11 VERY ERUDITE I'M AFRAID BUT IT'S BEEN MY EXPERIENCE THAT, I  
12 KNOW WHERE I'VE BEEN, I DON'T KNOW WHY I'M GOING, AND JUST  
13 BECAUSE EACH OF YOU HAS A JOB TODAY, YOU DON'T KNOW WHERE  
14 YOU'RE GOING. GOD'S GRACE, YOU KNOW, THAT YOU'RE EMPLOYED AND  
15 THAT YOU HAVE PROPER SANITATION AND A PLACE TO SLEEP AND FOOD  
16 TO EAT. BUT FOR THOSE THAT DON'T HAVE IT, AND TO DEPRIVE THEM  
17 OF ANY SORT OF DIGNITY IS JUST AN ABOMINATION, IN MY OPINION.  
18 I IMPORE YOU ONCE AGAIN TO PLEASE GIVE THIS CAREFUL  
19 CONSIDERATION. THANK YOU VERY MUCH.

20

21 **SUP. BURKE, CHAIR:** MR. WILLIAMS?

22

23 **WARREN WILLIAMS:** I'M REPRESENTING THE FOUNDATION AND  
24 INSTITUTION OF ABUSE, I'M ALSO ON THE SPIRITUAL COMMITTEE FOR  
25 THE HUNDRED THOUSAND MAN MARCH. INSTEAD OF JUST SPEAKING TO



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1 THE BOARD, INSTEAD TODAY I'M GOING TO SAY A WORD OF PRAYER,  
2 AND IN MY WORDS, INSTEAD I WOULD PRESENT THEM IN A PRAYER. WE  
3 PRAY TODAY THAT THOSE WHO CONTINUE TO ABUSE AND MISAPPROPRIATE  
4 FUNDS, THAT THEY WILL FIND IT WITHIN THEMSELVES TO QUIT DOING  
5 IT, THAT WE WILL USE OUR FUNDS TO MEET THE NEEDS OF OUR  
6 PEOPLE, THAT WE WILL LOOK UPON THE CONDITION THAT'S GOING ON  
7 DOWNTOWN L.A. AND EVERYWHERE ELSE WHERE THERE'S HOMELESS  
8 PEOPLE SUFFERING THE CONDITIONS OF NASTY TOILETS, UNCLEAN  
9 CONDITIONS, TO REMIND OURSELVES THAT HOMELESS PARENTS HAVE  
10 CHILDREN ALSO THAT MUST SUFFER THESE CONDITIONS. TO REMIND  
11 OURSELVES OF THE HISTORY OF AMERICA, THE LEGACY THAT WHEN  
12 BLACK PEOPLE WERE FIRST EMANCIPATED, THEY FORMED THE FREEMAN'S  
13 BUREAU, AND IN ONE YEAR, EVEN THOUGH THEY PLACED THEM ON  
14 CONFISCATED LAND THEY TOOK THEIR LAND BACK AND THEN A  
15 PHENOMENA OF COUNTLESS NUMBERS OF PEOPLE BEING FORCED INTO  
16 HOMELESS CONDITIONS, DRIVEN INTO HORRIBLE URBAN ENVIRONMENTS  
17 PERSISTS EVEN 'TIL THIS DAY, THAT THE MINDS OF THOSE WHO SIT  
18 IN SEATS OF POWER WILL CHANGE THEIR CONSCIOUSNESS TO HAVE A  
19 CONSCIOUSNESS OF CARING, OF RESPECT, THAT THEIR HORRIBLE SINS  
20 OF AMERICA AND LOS ANGELES COUNTY, THAT INSTEAD, WE WILL  
21 ADDRESS ISSUES LIKE IN ITEM NUMBER 14 OF A CHILD BEING KILLED,  
22 AND UNDERSTAND HOW IT RELATES TO THIS ISSUE OF HOMELESSNESS,  
23 THAT WITH YOUNG CHILDREN AND PARENTS THEY'RE DRIVEN BY  
24 TERRIBLE CONDITIONS OF DISADVANTAGE MISTREATMENT, THAT BY  
25 NATURE THEY'RE DRIVEN TO OUTRAGE AND THEREFORE LEADS INTO



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1 VIOLENCE, AND IT THEREFORE WILL GO TO HEAL AMERICA, HEAL THE  
2 POPULATION, HEAL THE PEOPLE AND ADDRESS THE CAUSE OF THESE  
3 PROBLEMS. WE ALSO LOOK AT ITEM NUMBER 21, THAT MANY PEOPLE ARE  
4 MENTALLY ILL.

5

6 **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH.

7

8 **WARREN WILLIAMS:** MAY I PLEASE JUST FINISH THESE LAST FEW  
9 COMMENTS?

10

11 **SUP. BURKE, CHAIR:** YES.

12

13 **WARREN WILLIAMS:** THAT MANY PEOPLE ARE MENTALLY ILL AND  
14 SUFFERING CONDITIONS AND WE MUST HAVE CHECK AND BALANCES SO  
15 THEY'RE NOT JUST WRONGLY MEDICATED AND DIAGNOSED AND FORCED TO  
16 USE THESE NASTY TOILETS, BUT INSTEAD, THE SAME AS THIS COUNTY,  
17 WENT BEFORE -- WENT OVERSEAS TO EXAMINE THE --

18

19 **SUP. BURKE, CHAIR:** THANK YOU, MR. WILLIAMS. YOUR TIME IS UP.

20

21 **WARREN WILLIAMS:** THAT YOU WILL GO SIMPLY DOWNTOWN TO EXAMINE  
22 THE TOILETS.

23

24 **SUP. BURKE, CHAIR:** THANK YOU FOR YOUR COMMENTS.

25



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1   **WARREN WILLIAMS:** AND MY FINAL STATEMENT IS I ASK YOU TO CLOSE  
2   THE TOILETS HERE IN THIS BUILDING RIGHT NOW TODAY AND LET  
3   EVERYONE GO DOWNTOWN AND USE THOSE OUTSIDE TOILETS. THANK YOU.

4

5   **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH. I WOULD MOVE -- [  
6   Applause ]

7

8   **SUP. BURKE, CHAIR:** DOES BIG MONEY GRIFF WANT TO SPEAK ON THIS?  
9   BIG MONEY GRIFF? I'M GOING TO MOVE THAT THE AMENDMENT THAT WE  
10   DIRECT THE LOS ANGELES HOMELESS AUTHORITY ALSO INCLUDE  
11   CONCERNED HOMELESS ADVOCATES IN THE MONITORING PROCESS SO  
12   THEIR INPUT COULD BE INCORPORATED INTO REQUESTED MONTHLY  
13   REPORTS. IS THERE A SECOND TO THAT? BY YAROSLAVSKY. YES HE'S  
14   HERE AND, YOU HAVE TWO MINUTES.

15

16   **BIG MONEY GRIFF:** GOOD MORNING, YVONNE BRATHWAITE-BURKE AND TO  
17   THE BOARD OF SUPERVISORS. I'M BIG MONEY GRIFF, COMMUNITY  
18   ACTIVIST AND LEADER, AND I JUST WANT TO SAY TO YOU ALL, HAPPY  
19   NEW YEAR. I DON'T NEED TO TELL YOU WHY WE'RE HERE. WE'RE HERE  
20   BECAUSE OF THE HOMELESSNESS. WE'VE BEEN WATCHING BROTHER TED  
21   HAYES NOW FOR A NUMBER OF YEARS. HE'S RUN FOR MAYOR. WE'VE  
22   SEEN THE TRIALS AND TRIBULATIONS THAT HE'S BEEN THROUGH IN  
23   GOING TO JAIL FOR THIS CAUSE. IT'S TIME, TIME TO MAKE A  
24   CHANGE, AND WE ARE THE PEOPLE WHO CAN DO IT. WHY? BECAUSE WE  
25   KNOW THAT IN THE 21st CENTURY, YEAR 2003, THAT IF WE CAN'T



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1 STOP THIS HOMELESSNESS OF 40 TO -- ACTUALLY IT'S 60,000  
2 HOMELESS PEOPLE THAT WE HAVE DOWNTOWN AND 40 OF THEM, I WOULD  
3 LIKE TO SEE YOU AT LEAST START DOING SOMETHING, SOMETHING IS  
4 BETTER THAN NOTHING WHEN WE TALK ABOUT HOW WE CAN DO IT  
5 THROUGH INCREMENTS OF YEARS, DO A LITTLE THIS YEAR, A LITTLE  
6 NEXT YEAR, AND SO FORTH AND SO ON, BUT LET'S DO SOMETHING TO  
7 HELP US HELP OURSELVES. WE'RE TIRED OF LIVING IN THESE  
8 STREETS, SEEING THESE PEOPLE IN THESE STREETS BEGGING,  
9 DEFECATING, ALL THESE DIFFERENT THINGS THAT'S GOING ON IN THE  
10 STREETS. HELP US TO HELP EACH OTHER, SUPERVISOR BURKE, AND I  
11 HAVEN'T SEEN MOLINA -- OH, SISTER MOLINA. OKAY. SO PLEASE HELP  
12 US TO GET THIS -- WELL, YOU KNOW, I'VE BEEN COMING HERE FOR A  
13 NUMBER OF YEARS, I'VE BEEN COMING FOR ALL THROUGHOUT THE '90s,  
14 FROM THE RODNEY KING ALL THE WAY UP TO NOW, AND SO I'VE GOT A  
15 KINSHIP WITH BROTHER ZEV, MY SUPERVISOR YVONNE BRATHWAITE-  
16 BURKE AND MOLINA, SO HELP US GET A CHANGE DOWN HERE AT --  
17 DOWNTOWN. THANK YOU.

18

19 **SUP. BURKE, CHAIR:** ALL RIGHT. THANK YOU. MOVED BY ANTONOVICH,  
20 SECONDED BY KNABE. WITHOUT OBJECTION, SO ORDERED. NOW, ON ITEM  
21 NUMBER 16, I HAD JUST ONE. GENEVIEVE CLAVREUL HAS ASKED TO  
22 SPEAK. I'M TRYING TO GO ON AND FINISH THIS, BUT BECAUSE WE  
23 HAVE A SPECIAL ITEM AT 11:00 AND COME RIGHT, SHE'S PASSING  
24 OKAY.

25





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1    **SUP. KNABE:** SPECIAL AMENDMENT.

2

3    **SUP. BURKE, CHAIR:** ALL RIGHT, THE AMENDMENT'S ACCEPTED. MOVED  
4    BY KNABE, SECONDED BY BURKE WITHOUT OBJECTION, 16 IS ADOPTED.  
5    SUPERVISOR MOLINA, DO YOU HAVE ADJOURNMENTS?

6

7    **SUP. MOLINA:** I'D LIKE TO ASK TODAY THAT WE ADJOURN IN THE  
8    MEMORY OF DOROTHY HARNSHORN WHO PASSED AWAY. SHE'S A LONG TIME  
9    RESIDENT OF BOYLE HEIGHTS, VERY INVOLVED, VERY LOYAL AND  
10    COMMITTED AS A COMMUNITY ACTIVIST. WE WANT TO EXTEND OUR  
11    DEEPEST CONDOLENCES TO HER FAMILY AND ALL THOSE WHO LOVED HER.

12

13    **SUP. BURKE, CHAIR:** SO ORDERED. DO YOU HAVE ANY SPECIALS?

14

15    **SUP. MOLINA:** NO.

16

17    **SUP. BURKE, CHAIR:** ALL RIGHT. SUPERVISOR YAROSLAVSKY?

18

19    **SUP. YAROSLAVSKY:** I'D LIKE TO ASK THAT WE ADJOURN IN THE  
20    MEMORY OF CHARLOTTE SHATS, WHO IS THE MOTHER OF CAROL SHATS OF  
21    THE DOWNTOWN CENTRAL CITY ASSOCIATION. THAT'S HER -- WE DID  
22    THAT LAST WEEK?

23

24    **SUP. KNABE:** WE DID IT LAST WEEK.

25



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1    **SUP. BURKE, CHAIR:** ALL RIGHT. ALL MEMBERS.

2

3    **SUP. KNABE:** ALL MEMBERS.

4

5    **SUP. YAROSLAVSKY:** ALL RIGHT, ALL MEMBERS, IF WE DID IT, ALL  
6    MEMBERS, DOUBLE CHECK. SOPHIA BRAVERMAN, WHO RECENTLY PASSED  
7    AWAY, THE MOTHER OF FREDDIE RIMBAUM IN MY DISTRICT. AND  
8    BERNICE SILVER, WHO PASSED AWAY AT THE AGE OF 74, IS SURVIVED  
9    BY HER DAUGHTERS, LAURA WEISSMAN AND DONNA CHESNAUGH AND HER  
10    GRANDCHILDREN.

11

12    **SUP. BURKE, CHAIR:** SO ORDERED. DO YOU HAVE ANY SPECIAL ITEMS  
13    TO INTRODUCE?

14

15    **SUP. YAROSLAVSKY:** NO, EXCEPT I DID WANT TO JUST -- ON COMMENTS  
16    THAT MR. ANTONOVICH MADE EARLIER CONCERNING TUDOR- SALIBA, AND  
17    I DON'T KNOW IF COUNTY COUNSEL IS HERE. WHERE HE, YOU CAN JUST  
18    ASK HIM TO -- I DON'T KNOW IF THERE'S ANY ACTION THAT WE CAN  
19    TAKE OR SHOULD TAKE. I CAN THINK OF A FEW ACTIONS I'D LIKE TO  
20    TAKE, BUT CAN YOU GIVE US A REPORT NEXT WEEK ON WHAT IF ANY  
21    OPTIONS THE COUNTY GOVERNMENT HAS AND PERHAPS WHILE WE'RE ALL  
22    SITTING HERE, ASK MR. CARNIVALI, THE M.T.A. COUNSEL, TO MAYBE  
23    GIVE US A REPORT FROM THE M.T.A.s PERSPECTIVE, IF THERE'S ANY  
24    ACTION THAT EITHER THE COUNTY OF L.A. OR THE M.T.A. COULD TAKE  
25    IN CONNECTION WITH THIS EPIDEMIC OF CONTRACTS THAT SEEMS TO BE



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1 GOING TO THIS ONE FIRM, THAT WE HAVE HAD SO MUCH EXPERIENCE  
2 WITH, AND YOUR OFFICE HAS HAD A GOOD DEAL OF EXPERIENCE WITH.  
3

4 **SUP. ANTONOVICH:** BECAUSE IN THAT COURT CASE, IT WAS THE ORDER  
5 THAT THEY WOULD NOT BE ALLOWED TO BID ON ANY FUTURE PUBLIC  
6 CONTRACTS.

7

8 **SUP. KNABE:** THE M.T.A.

9

10 **SUP. ANTONOVICH:** FROM THE M.T.A., BUT ALSO THAT IT WAS TO BE  
11 ANYWHERE IN THE UNITED STATES. SUP. BURKE, CHAIR: WAS THAT THE  
12 ORDER?

13

14 **SUP. YAROSLAVSKY:** WELL THAT WAS ANOTHER ISSUE. IT WASN'T UP TO  
15 THEM, BUT THERE WAS AT THE TIME THAT THIS RULING CAME DOWN, IF  
16 MY MEMORY SERVES ME CORRECTLY, THE CITY ATTORNEY, WHO WAS THEN  
17 MR. HAHN, ACTUALLY -- I DON'T KNOW WHAT THE TECHNICAL WORD IS,  
18 BUT THEY HAD HIM -- THEY HAD THAT FIRM FROZEN FROM BIDDING,  
19 NOT DISBARRED, BUT SOMETHING BETWEEN BARRED AND DISBARRED.

20

21 **SUP. ANTONOVICH:** PURGATORY, HUH?

22

23 **SUP. YAROSLAVSKY:** AND THEY WERE IN A STATE OF SUSPENSION. AND  
24 I GUESS THE NEW CITY ATTORNEY, OR MAYBE IT STARTED WITH THE  
25 OLD CITY ATTORNEY, I DON'T KNOW, BUT SOMEWHERE ALONG THE LINE,



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1 THAT SUSPENSION HAS BEEN LIFTED AND THAT DOESN'T CHANGE THE  
2 FACTS ABOUT THIS FIRM, AND AS WE'VE EXPERIENCED THEM. DID YOU  
3 WANT TO SAY SOMETHING?

4

5 **COUNSEL PELLMAN:** WELL, JUST AS TO THE M.T.A. CASE, I THINK  
6 THAT CASE IS ON APPEAL, WHICH PROBABLY WOULD HAVE PUT ON HOLD  
7 AS FAR AS THE M.T.A. ITSELF THE BAR OF THEIR FUTURE  
8 CONTRACTING WITH THEM.

9

10 **SUP. YAROSLAVSKY:** YOU'VE GOT TO SPEAK UP. I CAN'T HEAR YOU AND  
11 I'M SITTING NEXT TO YOU.

12

13 **COUNSEL PELLMAN:** OKAY. SUPERVISOR ANTONOVICH RAISED THE ISSUE  
14 WITH RESPECT TO THE M.T.A. AND THE COURT'S ORDER BUT THAT CASE  
15 I BELIEVE IS STILL ON APPEAL, AND THAT APPEAL WOULD HAVE  
16 STAYED THE COURT'S ORDER WITH RESPECT TO CONTRACT WITH THE  
17 M.T.A. AND I'LL TALK TO STEVE AND WE'LL GET A REPORT FOR YOU  
18 WITH RESPECT TO --

19

20 **SUP. YAROSLAVSKY:** WELL HE'S NOT -- HE DOESN'T HAVE ANY MORE  
21 CONTRACTS WITH THE M.T.A. AND HE'S NOT GETTING ANY MORE  
22 CONTRACTS WITH THE M.T.A., AND HE DIDN'T EVEN BID ON A  
23 CONTRACT HERE. I THINK WE ALL RECALL THAT THE ISSUE OF THE  
24 COUNTY U.S.C. MEDICAL CENTER ISSUE. SO HE'S NOT BIDDING HERE  
25 AND HE'S NOT BIDDING AT M.T.A., AND --



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1

2 **COUNSEL PELLMAN:** BUT OTHER PUBLIC AGENCIES HAVE BEEN AWARDING  
3 CONTRACTS.

4

5 **SUP. YAROSLAVSKY:** AND I DON'T KNOW WHAT THE OTHER -- I THINK  
6 THE OFFICE OF INSPECTOR GENERAL OF THE UNITED STATES  
7 DEPARTMENT OF TRANSPORTATION WAS BEING ASKED TO LOOK INTO IT,  
8 OR MAYBE HAS LOOKED INTO IT OR MAY STILL BE LOOKING INTO IT. I  
9 KNOW THERE'S A FEDERAL JUSTICE DEPARTMENT INVESTIGATION IN SAN  
10 FRANCISCO, ABOUT D.B.E.'S AND THAT SORT OF THING CONCERNING  
11 THIS FIRM, SO THERE'S A LOT THERE, AND, OF COURSE, THE ONLY  
12 JUDGMENT THAT WE HAVE EXPERIENCED, APPEAL OR NOT ON APPEAL,  
13 WAS THE ONE THAT WE HAD LAST YEAR, AND IT MAY BE ON APPEAL,  
14 HE'S PAYING DEARLY FOR THAT APPEAL. I THINK HE SET THE BOND  
15 ONE AND A HALF TIMES THE VALUE OF THE JUDGMENT. SO ANYWAY, I  
16 WOULD JUST LIKE TO KNOW WHAT OUR OPTIONS ARE IN TERMS OF THE  
17 CITY AND THE SCHOOL DISTRICT. I MEAN, IF THEY HAVE DECIDED TO  
18 DO THIS, AND IF THERE'S -- DO WE HAVE ANY OPTIONS TO  
19 INTERCEDE, TO SUE? I MEAN I'M NOT SUGGESTING WE DO, I JUST  
20 WANT TO KNOW WHAT OUR OPTIONS ARE, BECAUSE CLEARLY, SOMETHING  
21 -- SOME FACTS ARE BEING -- OR SOME INFORMATION'S BEING IGNORED  
22 OVER THERE, AND WE MAY NOT HAVE ANYTHING WE CAN DO ABOUT IT,  
23 BUT IF THERE IS, I'D LIKE TO KNOW SO THAT WE CAN MAKE AN  
24 INFORMED JUDGMENT. THANK YOU. THAT'S ALL I HAVE.

25



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1   **SUP. BURKE, CHAIR:** SUPERVISOR KNABE?

2

3   **SUP. KNABE:** YES. MADAM CHAIR, MEMBERS OF THE BOARD, I WOULD  
4   ASK THAT WE ADJOURN IN MEMORY TODAY OF JESSE FACTOR. JESSE IS  
5   THE GRANDMOTHER OF MY STAFF MEMBER, LINDA TARNOFF, WHO PASSED  
6   AWAY YESTERDAY AT THE AGE OF 102. SHE LEAVES BEHIND THREE  
7   CHILDREN, SEVEN GRANDCHILDREN, AND NUMEROUS GREAT  
8   GRANDCHILDREN.

9

10   **SUP. BURKE, CHAIR:** ALL MEMBERS.

11

12   **SUP. KNABE:** ALSO THAT WE ADJOURN IN MEMORY OF CORNY ROSSDAM, A  
13   LONG TIME RESIDENT OF THE CITY OF BELLFLOWER. AND HE WAS A  
14   GREAT CITIZEN OUT THERE, VERY ACTIVE IN THE TRUCKING INDUSTRY  
15   AND REAL ESTATE. HE WAS A VERY OUTGOING PERSON WHO WILL BE  
16   REMEMBERED FOR HIS FRIENDSHIP AND HIS GOOD ADVICE. HE PASSED  
17   AWAY VERY SUDDENLY ON JANUARY 21st. ALSO THAT WE ADJOURN IN  
18   MEMORY OF MR. MARIO MENDEZ, AND MARIO IS THE FATHER OF NOR  
19   WALK CITY COUNCIL MEMBER MIKE MENDEZ, PASSED AWAY ON JANUARY  
20   15th. HE WAS 81 YEARS OLD. HE SERVED IN THE UNITED STATES  
21   ARMED FORCES. HE MARRIED HIS WIFE, SARAH, IN 1941 AND THEY  
22   CELEBRATED THEIR 50th WEDDING ANNIVERSARY IN MAY OF 1991. HE'S  
23   SURVIVED BY HIS WIFE OF 61 YEARS, SARAH, EIGHT CHILDREN, MARIO  
24   JR., EDWARD, SANDRA, MICHAEL, RALPH, ANTHONY, MARK, MARIA AND  
25   15 GRANDCHILDREN. ALSO THAT WE ADJOURN IN MEMORY OF EILEEN



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1 BOLAN, A LONG TIME LAKEWOOD RESIDENT FOR OVER 60 YEARS.  
2 ADJOURN IN MEMORY OF MR. WILLIAM CURTIS, A LONG TIME FOURTH  
3 DISTRICT RESIDENT WHO PASSED AWAY SUDDENLY OF A HEART ATTACK  
4 ON JANUARY 13th. WE ADJOURN IN MEMORY OF MR. JAMES HASTING,  
5 THE FOUNDER OF STAR JEWELERS AND BIXBY KNOLLS, HE WAS A LONG  
6 TIME ENTREPRENEUR ON LONG BEACH, HE WAS AN ACTIVE RESIDENT IN  
7 HIS COMMUNITY AND INVOLVED IN TRAVELING. HE IS SURVIVED BY HIS  
8 WIFE, MOLLY, SON STEVE, TWO GRANDCHILDREN, AND 21 ADOPTED  
9 GRANDCHILDREN. BUT ALSO WE ADJOURN IN MEMORY OF MR. GEORGE  
10 THOMPSON, A LONG TIME RESIDENT OF HARBOR CITY. HE LEAVES  
11 BEHIND HIS WIFE, JESSE, HE WORKED FOR THE FOURTH DISTRICT A  
12 NUMBER OF YEARS AGO. HIS DAUGHTER GREER, AND TWO SONS, KEITH  
13 AND ERNEST. AND I DID HAVE AN ADJOURNMENT FOR MR. MORRIS KITE,  
14 BUT WE DID THAT LAST WEEK AS WELL, TOO SO.

15

16 **SUP. BURKE, CHAIR:** SO ORDERED.

17

18 **SUP. KNABE:** I HAVE, JUST GIVE ME JUST ONE MORE, AND THAT WAS  
19 TO ADJOURN IN MEMORY OF SUMMER LADD. MR. LADD PASSED AWAY ON  
20 JANUARY 4th. HE IS SURVIVED BY HIS BROTHER, HOWARD, TWO  
21 CHILDREN, STEVEN AND BARBARA, AND THEIR MOTHER, BETTY JANE.

22

23 **SUP. BURKE, CHAIR:** SO ORDERED.

24

25 **SUP. KNABE:** I DON'T HAVE ANYTHING FOR NEXT WEEK.





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1

2 **SUP. BURKE, CHAIR:** ALL RIGHT. YES, SUPERVISOR ANTONOVICH?

3

4 **SUP. ANTONOVICH:** I'D LIKE TO MOVE THAT WE ALSO ADJOURN IN  
5 MEMORY OF DELBURT BUCKY WALTER, WHO WAS THE ANTELOPE VALLEY  
6 FOOTBALL COACH AND ATHLETIC DIRECTOR FOR MORE THAN TWO DECADES  
7 WHO PASSED AWAY AT THE AGE OF 84. GARY BEACH, WHO IS A RETIRED  
8 LIEUTENANT WITH THE LOS ANGELES COUNTY SHERIFF'S DEPARTMENT.  
9 CAROL BIRDMAN OF THE ANTELOPE VALLEY, WHO WAS INVOLVED WITH  
10 THE ANTELOPE VALLEY ALPHA FESTIVAL. SUSAN FRANCES LYLE OF THE  
11 SANTA CLARITA VALLEY AND RICHARD SHRINE OF THE ANTELOPE  
12 VALLEY.

13

14 **SUP. BURKE, CHAIR:** SO ORDERED. IF THERE'S NOTHING FURTHER,  
15 WE'LL GO TO THE 11:00 BEILENSEN HEARING, S-1, A PUBLIC HEARING  
16 REGARDING PROPOSED REDUCTIONS IN HEALTH SERVICES AT  
17 L.A.C./U.S.C. MEDICAL CENTER AND RANCHO LOS AMIGOS NATIONAL  
18 REHABILITATION CENTER, AS SET FORTH IN THE NOTICE FOR THIS  
19 HEARING. THE WAY I INTEND TO PROCEED IS TO FIRST CALL RICARDO  
20 TERJO, WHO IS THE MAYOR OF THE CITY OF DOWNEY AND DR.  
21 JACQUELINE PERRY. AFTER THAT, WE WILL CALL THOSE PEOPLE WHO  
22 ARE WHEELCHAIR BOUND AND WE WILL CALL THEM BEFORE WE CALL ANY  
23 OTHER WITNESSES. WOULD THE MAYOR OF THE CITY OF DOWNEY PLEASE  
24 COME FORWARD WITH DR. JACQUELINE PERRY? [ Cheers and Applause  
25 ] [ Enthusiastic Cheers and Applause ]



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1

2 **SUP. BURKE, CHAIR:** ALL RIGHT. EVERYONE HAS HAD A CHANCE TO  
3 HOLD UP THEIR SIGNS AND TO DEMONSTRATE. NOW, IN ORDER FOR  
4 PEOPLE TO BE HEARD, WE ARE GOING TO ASK THAT THERE BE NO  
5 FURTHER DEMONSTRATIONS. YOU CAN HOLD UP YOUR SIGNS AS LONG AS  
6 YOU DON'T MAKE NOISE TO INTERFERE WITH THE TESTIMONY OF THOSE  
7 PEOPLE WHO WILL BE TESTIFYING. YOU ARE VERY FREE TO PUT UP  
8 YOUR SIGNS AND HOLD THEM UP, BUT THIS IS GOING TO BE A LONG  
9 HEARING.

10

11 **SUP. MOLINA:** MISS BURKE, A POINT OF ORDER, I'M JUST UNCLEAR, I  
12 THOUGHT WE WERE GOING TO GET THE REPORT FIRST.

13

14 **SUP. BURKE, CHAIR:** ALL RIGHT, WE'LL GET THE REPORT -- YOU WANT  
15 THE REPORT FIRST?

16

17 **SUP. MOLINA:** WELL I JUST THINK IT'LL BE PUT IN CONTEXT WHERE  
18 WE ARE.

19

20 **SUP. BURKE, CHAIR:** COULD WE -- DO YOU HAVE -- I DON'T KNOW.  
21 SUPERVISOR KNABE HAD ASKED IF WE COULD --

22

23 **SUP. KNABE:** ALL I ASKED IS ONCE THE REPORT WAS MADE, THAT THE  
24 RANCHO RANCHO PORTION CAN GO FIRST.

25



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1   **SUP. BURKE, CHAIR:** ALL RIGHT, SINCE THEY'RE HERE, WHY DON'T WE  
2   -- CAN WE HEAR FROM THEM AND THEN WE'LL HAVE THE REPORT. IS  
3   THAT A PROBLEM, SINCE THESE PEOPLE ARE ALREADY UP HERE? ALL  
4   RIGHT. THANK YOU. YES. GO AHEAD.

5

6   **RICARDO TERJO:** THANK YOU. THANK YOU FOR ALLOWING ME TO BE HERE  
7   TODAY. AS THE MAYOR OF THE CITY OF DOWNEY, ON BEHALF OF THE  
8   CITY, I URGE THE BOARD OF SUPERVISORS TO MAINTAIN OPERATION OF  
9   RANCHO LOS AMIGOS NATIONAL REHABILITATION CENTER WITH THIS  
10   CURRENT MISSION OF SERVICES AS COUNTY HOSPITAL OR UNDER AN  
11   ALTERNATIVE FORM OF GOVERNANCE. RANCHO LOS AMIGOS IS THE  
12   LARGEST EMPLOYER IN DOWNEY WITH 1,600 EMPLOYEES AND SERVES A  
13   NUMBER OF CRITICALLY DISABLED RESIDENTS OF THE CITY AS WELL AS  
14   THE COUNTRY. THE CITY OF DOWNEY UNDERSTANDS THAT THE COUNTY IS  
15   FACING A MAJOR HEALTH BUDGET DEFICIT. HOWEVER, THE CITY URGES  
16   THE BOARD OF SUPERVISORS TO EXHAUST EVERY POSSIBLE OPTION FOR  
17   CONTINUED OPERATION OF RANCHO. BEFORE VOTING TO ELIMINATE  
18   COUNTY FUNDING FOR ITS DISTINGUISHED AND NATIONALLY-  
19   RECOGNIZED-RANKED MEDICAL FACILITY, INCLUDING AN OPTION I WILL  
20   OFFER YOU RIGHT NOW ON BEHALF OF THE CITY. THE CITY WOULD LIKE  
21   TO MAKE A SUGGESTION TO THE BOARD OF SUPERVISORS TO PRIORITIZE  
22   THE DEVELOPMENT OF THE SOUTH SIDE OF THE CAMPUS AND EARMARK  
23   DEVELOPMENT REVENUE FOR THE HOSPITAL AND ITS OPERATIONS. THE  
24   CITY STAFF RECENTLY MET WITH C.A.O.'S OFFICE TO OFFER THE  
25   CITY'S MEDIA ASSISTANCE AND MARKETING THE SITES BASED ON A



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1 NUMBER OF INQUIRIES BE RECEIVED FROM DEVELOPERS ABOUT THE  
2 VALUABLE LAND. PLEASE DELAY ANY DECISION TODAY AND SPEND MORE  
3 TIME CONSIDERING THE VARIOUS OPTIONS BEFORE YOU, INCLUDING THE  
4 ONE I JUST OFFERED. ALL OF RANCHO STAKEHOLDERS, ESPECIALLY THE  
5 PATIENTS, DESERVE THIS. THANK YOU FOR YOUR TIME. AND BEFORE --  
6 I'D LIKE TO MENTION, TOO, THAT WE HAVE THE CITY AND WITH THE  
7 SUPPORT OF THE COUNCIL, WE HAVE THE UTMOST CONFIDENCE THAT WE  
8 CAN DEVELOP THE SOUTH SIDE OF THE FACILITY AND HOPEFULLY  
9 DIRECT THE MONEY TO SUBSIDIZE THE HOSPITAL. SO THE HOSPITAL  
10 CAN MAINTAIN ITS SERVICES TO THE COMMUNITY, TO THE REGION, AND  
11 TO THE NATION. ALSO, I AM A PHARMACIST BY CAREER AND I WORK AT  
12 A HOSPITAL CLOSE TO RANCHO, AND IT WOULD IMPACT A LOT OF THE  
13 HOSPITALS IN THE VICINITY, AND THEY'RE NOT EQUIPPED TO HANDLE  
14 THE TYPE OF PATIENTS THAT WOULD COME FROM RANCHO LOS AMIGOS.  
15 AND WITH OUR SHORTAGE IN NURSES, THEY WOULDN'T BE ABLE TO  
16 HANDLE THE IMPACT AND I THANK YOU FOR ALLOWING ME TO BE HERE  
17 TODAY. THANK YOU.

18

19 **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH. DR. PERRY. [ Applause  
20 ] .

21

22 **SUP. BURKE, CHAIR:** WE'RE NOT HAVING -- [ Applause ] .

23

24 **SUP. BURKE, CHAIR:** YOU CAN HOLD YOUR SIGNS UP. WE'RE NOT GOING  
25 TO HAVE APPLAUSE. YES, THANK YOU.



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1  
2 **JACQUELIN PERRY:** GOOD MORNING. I'M JACQUELIN PERRY, AN  
3 ORTHOPEDIC SURGEON AT RANCHO FOR 47 YEARS. THIS IS A PLEA FOR  
4 POLITICAL EXPERTISE, NOT MONEY. THE RANCHO REHABILITATION  
5 PROGRAM BEGAN BY PATIENT NEED. IT STARTED AS A POLIO  
6 RESPIRATORY CENTER BECAUSE THE COMMUNITY PHYSICIANS COULD NOT  
7 HANDLE THE SEVERE PARALYSIS OF LIMBS AND BREATHING. RANCHO  
8 SOON ADDED A SPINAL CORD INJURY AND THEN GREW INTO A MULTI-  
9 DISCIPLINARY CENTER BECAUSE OF THE COMPLICATIONS WHICH  
10 PATIENTS WITH RECENT SPINAL CORD INJURY AND BRAIN INJURY AND  
11 SO DEVELOPED WHEN ACUTE SERVICES WERE OBLIGATED TO INCLUDE  
12 REHABILITATION. TODAY, RANCHO REHABILITATION CENTER IS RATED  
13 ONE OF THE LARGEST AND BEST IN THE UNITED STATES. L.A. COUNTY  
14 PATIENTS GREATLY NEED THIS SERVICE. THE HEALED NERVES OF THE  
15 POST-POLIO SURVIVORS ARE FAILING FROM OVERUSE. FUNCTION ONCE  
16 RECOVERED IS BEING LOST. THIS IS THE POST-POLIO SYNDROME.  
17 COMMUNITY DECISIONS CANNOT HELP. THEIR BACKGROUND IS NO POLIO  
18 FOR THE LAST 40 YEARS. THEY DON'T KNOW THE PROBLEM. THE ONLY  
19 COMPREHENSIVE POST-POLIO CLINIC IN SOUTHERN CALIFORNIA IS AT  
20 RANCHO. SURVIVORS OF SPINAL CORD INJURY, BRAIN INJURY AGAIN  
21 WOULD BE TRAPPED IN A DETERIORATING CONDITION OF PRE-RANCHO  
22 STATUS IF TIMELY REHABILITATION WAS NOT PROVIDED. BUT L.A.  
23 COUNTY HAS DEBTS, NOT MONEY. REPLACE THIS WITH YOUR EXCELLENT  
24 POLITICAL EXPERTISE. SUPERVISORS, PLEASE REDIRECT YOUR SKILLS



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1 TO HELP RANCHO FIND ANOTHER FUNDING BASE. I BEG YOU TO HELP  
2 SAVE RANCHO. [ Applause ].

3

4 **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH. WE'LL NOW HAVE REPORT  
5 THE LATE REPORT, FROM THE DEPARTMENT.

6

7 **SPEAKER:** MRS. CHAIRMAN, COULD I SUBMIT THIS DECLARATION TO?

8

9 **SUP. BURKE, CHAIR:** ABSOLUTELY.

10

11 **SPEAKER:** THANK YOU.

12

13 **SUP. BURKE, CHAIR:** WE'LL NOW HAVE THE REPORT FROM THE BOARD.  
14 DR. GARTHWAITE?

15

16 **DR. THOMAS GARTHWAITE:** MADAM CHAIRWOMAN AND HONORABLE  
17 SUPERVISORS. IN JUNE, YOU APPROVED A PLAN TO RESTRUCTURE THE  
18 DEPARTMENT OF HEALTH SERVICES THROUGH TARGETED REDUCTIONS AND  
19 EFFICIENCIES. TODAY YOU HOLD BEILENSEN HEARINGS ON TWO  
20 PROPOSED ACTIONS WHICH ARE NECESSARY TO ACHIEVE THAT PLAN. THE  
21 BED REDUCTIONS AT L.A. COUNTY U.S.C. ARE STRAIGHTFORWARD,  
22 ALTHOUGH WE CONTINUE TO EXPLORE THE EXACT BED CONFIGURATIONS  
23 IN ORDER TO MINIMIZE THE IMPACT ON CLINICAL CARE. ON OCTOBER  
24 29th, 2002, WE RECOMMENDED THAT YOU CLOSE RANCHO LOS AMIGOS  
25 NATIONAL REHABILITATION CENTER IF THE RESULTS OF OUR INTERNAL



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1 ANALYSIS COULD BE CONFIRMED. THE STUDY YOU ORDERED FROM BLUE  
2 CONSULTING IS CONSISTENT WITH THE DEPARTMENT'S EARLIER  
3 ANALYSIS AND AFFIRMS THAT CONTINUING TO OPERATE RANCHO EVEN  
4 UNDER A SEPARATE GOVERNANCE AUTHORITY WOULD REQUIRE  
5 SIGNIFICANT ADDITIONAL INVESTMENT. A SEPARATE INDEPENDENT  
6 ANALYSIS CONDUCTED BY GILL BELSAMO FOR THE CALIFORNIA  
7 COMMUNITY FOUNDATION CONCLUDES THAT RANCHO IS AN ASSET FOR THE  
8 ENTIRE COMMUNITY, THAT THE COUNTY SHOULD NOT SHOULDER THE  
9 FINANCIAL BURDEN FOR THAT ASSET ALONE, THAT ADDITIONAL  
10 SPECIALTY REHABILITATION BEDS ARE NEEDED IN THE COUNTY, AND  
11 THAT THE BEST MODEL FOR RANCHO IS AS AN INDEPENDENT, NOT-FOR-  
12 PROFIT ENTITY. THE CALIFORNIA COMMUNITY FOUNDATION AND OTHER  
13 INTERESTED PARTIES ARE EXPLORING THE FEASIBILITY OF CREATING  
14 SUCH AN ENTITY. LOS ANGELES IS A LARGE CITY WITH BOTH THE NEED  
15 AND THE RESOURCES TO SUPPORT AN INDEPENDENT REHABILITATION  
16 HOSPITAL WITH A NATIONAL REPUTATION FOR QUALITY CARE AND  
17 RESEARCH. RANCHO'S STRENGTHS ARE ITS EXPERTS, ITS NATIONAL  
18 REPUTATION AND ITS COMPASSION. THE DEPARTMENT AGREES WITH THE  
19 THRUST OF THESE CONSULTANT REPORTS AND BELIEVES THAT WITHOUT  
20 INDEPENDENCE AND PHILANTHROPIC SUPPORT, THE RANCHO MODEL OF  
21 CARE IS NOT SUSTAINABLE. LAST YEAR, ABOUT 80% OF RANCHO  
22 PATIENTS HAD A PAYER SOURCE TO COVER THE COST OF THEIR CARE.  
23 IF RANCHO IS CLOSED, THE DEPARTMENT WILL PURCHASE OR PROVIDE  
24 REHABILITATION SERVICES IN OTHER FACILITIES FOR THE REMAINING  
25 PATIENTS WHO HAVE NO INSURANCE AND WHO ARE WITHIN OUR MANDATED





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1 PATIENT POPULATION. PATIENTS WHO NEED REHABILITATION CARE WILL  
2 GET THAT CARE AND WE WILL SAVE ABOUT \$60 MILLION TO PRESERVE  
3 CARE ELSEWHERE IN OUR SYSTEM. WE THEREFORE RECOMMEND THAT YOUR  
4 BOARD HOLD THE REQUIRED PUBLIC HEARING AND ON COMPLETION OF  
5 THE HEARING, APPROVE THE PROPOSED REDUCTIONS AND SERVICES AT  
6 L.A. COUNTY, U.S.C., AND RANCHO LOS AMIGOS, THANK YOU.

7

8 **AUDIENCE:** BOOs.

9

10 **SUP. BURKE, CHAIR:** WE'LL NOW PROCEED, MAYBE I SHOULD BE A  
11 LITTLE BIT CLEARER. WE'RE NOT GOING TO HAVE DEMONSTRATIONS  
12 OTHER THAN PEOPLE HOLDING UP THEIR SIGNS. IT'S UNFAIR TO  
13 PEOPLE WHO ARE SPEAKING. AND ARE THERE ANY QUESTIONS OF THE  
14 BOARD AT THIS TIME? OR WOULD YOU LIKE TO GO FORWARD WITH THE  
15 HEARING. YOU HAVE QUESTIONS? YOU HAVE A QUESTION? NO? ALL  
16 RIGHT.

17

18 **SPEAKER:** I'LL JUST WAIT 'TIL LATER, I WAS GOING TO HAVE THE  
19 HEARING NOW.

20

21 **SUP. BURKE, CHAIR:** ALL RIGHT. WE'LL NOW CALL THE LIST OF  
22 PEOPLE WHO ARE WHEELCHAIR USERS, AND I'D LIKE TO ASK THEM TO  
23 COME FORWARD. RICHARD DAGGET, ROBERT THONE AND ANN RUTH. WOULD  
24 YOU PLEASE COME FORWARD? AND LET ME JUST TELL YOU THE NEXT  
25 THREE PEOPLE I'LL BE CALLING WILL BE RICHARD ELISONDOFF, GREG



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1 THOMPSON AND NOE HERNANDEZ WILL BE THE NEXT THREE AFTER THESE  
2 THREE PEOPLE ARE HEARD FROM. WOULD YOU STATE YOUR NAME?  
3  
4 **ROBERT THONE:** MY NAME IS ROBERT THONE. AND I'M STARTING, AND  
5 I'M TALKING STRICTLY TO THE SUPERVISORS THAT VOTED AGAINST  
6 RANCHO. KNABE, I GOT NO PROBLEM WITH YOU, SO... BUT BURKE AND  
7 ANTONOVICH AND MOLINA, ALL THOSE THAT VOTED AGAINST RANCHO,  
8 ALL I WANT TO SAY IS THAT I KNOW YOU'RE AFRAID OF THE DEFICIT.  
9 WE'RE ALL AFRAID OF THE DEFICIT. AND I KNOW IT SEEMS  
10 OVERWHELMING AND IMPOSSIBLE, BUT YOU CAN'T CAVE IN ON US. YOU  
11 CAN'T QUIT ON US. YOU KNOW, BACK IN '69, WHEN THEY TOLD ME  
12 THAT I'D NEVER HAVE THE USE OF MY ARMS AND HANDS AGAIN, AND --  
13 OR MY LEGS, AND THEY TOLD ME I'D NEVER HAVE CHILDREN AGAIN,  
14 YOU KNOW, I THOUGHT THAT WAS IMPOSSIBLE, I THOUGHT THAT WAS  
15 OVERWHELMING, AND I WAS SCARED, BUT WITH THE HELP OF OTHERS, I  
16 WAS ABLE TO BECOME A TAXPAYING CITIZEN, A HUSBAND, A FATHER, A  
17 GRANDFATHER, AND I TELL MY GRANDKIDS, YOU KNOW, YOU CAN'T GIVE  
18 UP, YOU KNOW, YOU CAN'T EVER QUIT, BECAUSE IF YOU DO, YOU'LL  
19 NEVER SUCCEED. BUT IF YOU TRY, WITH THE HELP OF OTHERS, YOU  
20 CAN ACHIEVE BEYOND YOUR DREAMS. SUPERVISORS, YOU ARE OUR  
21 CHAMPIONS. WE VOTED FOR YOU AND WE VOTED FOR YOU TO FIGHT FOR  
22 US. SO DON'T GIVE UP ON US. DON'T CAVE IN. WE'RE WORTH MORE  
23 THAN THAT. YOU'RE WORTH MORE THAN THAT. THANK YOU. [ Applause  
24 ]  
25



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1     **SPEAKER:** ANNIE?

2

3     **ANN RUTH:** HELLO, MY NAME IS ANN RUTH. I'VE BEEN INVOLVED WITH  
4     RANCHO FOR OVER 30 YEARS AND WAS FIVE GOING INTO IT, AGE FIVE,  
5     DUE TO A GYMNASTIC ACCIDENT, THEN IN 36 I HAD A BACK FUSION  
6     AND IN 2000, I HAD SOME SKIN REPLACEMENT SURGERY. BUT I'VE  
7     BEEN AN OUTPATIENT FOR MANY YEARS. AND RANCHO HAS HELPED ME  
8     AND MANY OTHERS FOR MANY, MANY YEARS AND HAS EXCELLENT SUPPORT  
9     GUIDANCE AND     KNOWLEDGEABLE DOCTORS AND NURSES THERE AND IT'S  
10    THERE IN THE HOSPITAL THAT THEY GO AFTER YOU'VE HAD A INJURY  
11    THAT REALLY UNDERSTAND WHAT TO DO AND HOW TO DO IT, AND PEOPLE  
12    GET BACK ON THEIR -- INVOLVED AND DECIDING COMMUNITY AND BE A  
13    WORKING PART AND, YOU KNOW, GET BACK INTO EDUCATION, HELP  
14    THEMSELVES AND HELP SOCIETY. AND I REALIZE SINCE OUR LAST  
15    MEETING RANCHO'S DONE SIGNIFICANT WORK AND -- THEY FEEL LIKE  
16    THEY HAVE FUNDING FOR JUNE BUT WOULD LIKE COMMITTED BY UNTIL  
17    DECEMBER WHERE THEY GO THROUGH THIS TRANSITIONAL STAGE OF  
18    GETTING THEMSELVES OUT FROM THE COUNTY AND IN ON THEIR OWN  
19    GROUNDS WHERE THEY CAN BE SELF-SUFFICIENT AND SUPPORTIVE, THAT  
20    THEY WANT TO DO IT RIGHT AND CONTINUE THE SERVICES AND SUPPORT  
21    BY PROVIDING QUALITY CARE WHILE THEY MAKE THIS TRANSITION. SO  
22    WE JUST URGE YOU TO CONTINUE FUNDING THROUGH DECEMBER, THAT  
23    WILL HELP RANCHO BE ON ITS FEET AND BE ABLE TO CONTINUE TO  
24    HELP MANY OTHER PEOPLE IN THE FUTURE. THANK YOU. [ Applause ]

25



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1   **SUP. BURKE, CHAIR:** THANK YOU. IF THE OTHER PEOPLE WHOSE NAMES  
2   I'VE CALLED WOULD PLEASE COME FORWARD. IF NOT, NOE HERNANDEZ,  
3   WILLIAM HAMPTON. NOW, RICHARD DAGGET HAS SPOKE. WAS THAT  
4   CORRECT? BUT ROBERT THONE, OKAY, RICHARD ELIZONDOFF, GREG  
5   THOMPSON AND NOE HERNANDEZ. PARDON ME? WOULD ANY OF THE PEOPLE  
6   WHO WE'VE CALLED COME FORWARD? OKAY, I THINK IT WOULD BE  
7   EASIER IF WE DID PUT A MIC THERE SO EVERYONE DOESN'T HAVE TO  
8   COME UP. IS THERE ANY OBJECTION TO THAT? BY THE PEOPLE WHO ARE  
9   GETTING READY TO SPEAK. A PERSON WHO'S CALLED WHO DOESN'T WANT  
10   TO COME UP AND WOULD LIKE TO HAVE A MICROPHONE, WE'LL MAKE IT  
11   AVAILABLE TO THEM. IF THEY OBJECT, WELL THEY HAVE A RIGHT TO  
12   COME UP TO THE PODIUM.

13

14   **RICHARD ELIZONDO:** GOOD MORNING. MY NAME IS --

15

16   **SUP. BURKE, CHAIR:** STATE YOUR NAME, PLEASE. STATE YOUR NAME  
17   PLEASE.

18

19   **RICHARD ELIZONDO:** AM I STARTING?

20

21   **SUP. BURKE, CHAIR:** YES.

22

23   **RICHARD ELISONDOFF:** MY TIME IS STARTING? MY NAME IS RICHARD  
24   ELISONDOFF AND I'M A FORMER PATIENT AT RANCHO LOS AMIGOS, ALSO  
25   A FORMER POLICE OFFICER. I DON'T EVEN KNOW WHERE TO START.



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1 WE'RE FACING SUCH ATTITUDINAL BARRIERS, AND I CAN'T THINK OF A  
2 BETTER EXAMPLE THAN BEING CALLED "WHEELCHAIR PEOPLE" BY  
3 YVONNE, I MEAN. [ Enthusiastic Cheers and Applause ].

4

5 **SUP. BURKE, CHAIR:** PLEASE ACCEPT MY APOLOGY. WHEELCHAIR USERS.

6

7 **RICHARD ELISONDOFF:** AND I REALIZE IT WASN'T INTENTIONAL, BUT  
8 THIS IS WHAT WE'RE --

9

10 **SUP. BURKE, CHAIR:** PLEASE ACCEPT MY APOLOGY, I'M SORRY.

11

12 **RICHARD ELISONDOFF:** THIS IS WHAT WE'RE FACING, AND I  
13 UNDERSTAND IT'S UNINTENTIONAL, BUT, I MEAN, IF IT CAN'T BE  
14 FIXED HERE, IF THE EXAMPLE CAN'T BE SET IN THIS ROOM, I DON'T  
15 KNOW WHERE IT CAN. THE POINT THAT I WANTED TO MAKE WAS THAT I  
16 HAVE BEEN HOSPITALIZED TWICE. I AM A RESIDENT OF DOWNEY. AND I  
17 ENDED UP AT TWO VERY GOOD FACILITIES. UNFORTUNATELY, AS GOOD  
18 AS THESE FACILITIES WERE, AS GREAT AS THE HELP WAS, AS  
19 EDUCATED AS THE NURSES WERE, THEY WERE NOT READY, THEY WERE  
20 NOT EQUIPPED TO DEAL WITH ME. THEY DID NOT KNOW HOW TO HANDLE  
21 ME. THEY HAD NO IDEA WHAT A URINARY TRACT INFECTION WAS, THEY  
22 HAD NO IDEA WHAT PAIN MANAGEMENT WAS, THEY HAD NO IDEA WHAT  
23 WOUND MANAGEMENT WAS. AND THESE ARE SOME OF THE FINEST  
24 HOSPITALS WHERE I ENDED UP. WITH THAT IN MIND, WE HAVE NO  
25 PLACE TO GO. RANCHO IS OUR ONLY HOME. THAT'S IT. THAT IS ALL



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1 WE HAVE. AND IT IS THE FOLKS AT RANCHO, IT IS THE DOCTORS, THE  
2 NURSES, ALL THE HELP, THE ATTENDANTS, THE PERSON AT JANITORIAL  
3 SERVICES WHO KNOW HOW TO TREAT US... WITH RESPECT, WITH  
4 EMPATHY, AND THAT IS WHAT IS NEEDED. AND THAT, YOU CAN'T PUT A  
5 PRICE ON THAT, FOLKS, YOU REALLY CAN'T PUT A PRICE ON THAT.  
6 THAT IS SOMETHING THAT COMES FROM THE HEART, THAT IT -- IT  
7 COMES FROM EXPERIENCE. NOW, I ASK YOU, I IMPLORE YOU, TO  
8 PLEASE LISTEN TO US, LISTEN WITH OPEN HEARTS AND TAKE US INTO  
9 CONSIDERATION AND PLEASE CONSIDER YOUR VOTE. THIS WILL DEEPLY  
10 AFFECT MANY OF US IN MANY WAYS, AND I THANK YOU FOR YOUR TIME.

11

12 **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH. [ Applause ]

13

14 **SUP. BURKE, CHAIR:** GREG THOMPSON AND NOE HERNANDEZ WILL BE  
15 NEXT, AND WILLIAM HAMPTON.

16

17 **GREG THOMPSON:** MADAM CHAIR, BEFORE I BEGIN, I WOULD LIKE TO  
18 SUBMIT MY DECLARATION AND THE DECLARATIONS OF OTHER AND SOME  
19 LETTERS IN SUPPORT OF RANCHO. MY NAME IS GREG THOMPSON, AND  
20 I'M THE DIRECTOR OF THE SOCIAL WORK SERVICES AT RANCHO, AND I  
21 AM VERY FAMILIAR WITH WHAT SERVICES ARE AVAILABLE AND ARE NOT  
22 AVAILABLE IN THE COMMUNITY. YOU VOTED TO CLOSE RANCHO WITHOUT  
23 ALL THE FACTS. THERE ARE NEW REPORTS AND YOU MUST STUDY THESE  
24 REPORTS. CONTRARY TO WHAT DR. GARTHWAITE'S BATTLE CRY IS,  
25 REHAB IS NOT A LUXURY, IT'S A RIGHT, AND IN THIS CASE, IT'S



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1 COST EFFECTIVE. PLEASE, DELAY THE CLOSURE OF RANCHO AND REVIEW  
2 ALL THE OPTIONS. THE DEPARTMENT OF HEALTH SERVICES WANTS TO  
3 CLOSE RANCHO AND KEEP THE Medi-Cal DISH MONEY. IS THIS LEGAL?  
4 IS THIS EVEN ETHICAL? IT CERTAINLY IS DISCRIMINATION. D.H.S.  
5 HAS PROMISED BIG SAVINGS ON PAPERS WITH NUMBERS THAT ARE  
6 CHANGING SO FAST, IT MAKES MY HEAD SPIN. WHO IS GOING TO ASK  
7 THE QUESTION AND WHAT ARE THE LONG-TERM COSTS AND WHAT IS THE  
8 LONG-TERM PLAN? NINE YEARS AGO, THERE WAS NO PLAN FOR THE  
9 UNINSURED EXCEPT CUT SERVICES AND CUT STAFF. TODAY, THERE IS  
10 STILL NO PLAN. PATIENTS WILL GET SICKER, OVERCROWDED EMERGENCY  
11 ROOMS AND TAKE UP VALUABLE ACUTE BEDS. THREE INDEPENDENT  
12 AUDITS PLUS DOCTORS AND HEALTHCARE PROFESSIONALS STATE WE ARE  
13 ALREADY SHORT 200 BEDS. CLOSING RANCHO AND CUTTING BEDS FROM  
14 U.S.C. WILL PUT US SOMEWHERE BETWEEN 400 AND 500 BEDS SHORT.  
15 PRIVATE HOSPITALS SUCH AS CEDARS HAVE REPORTED CONCERNS  
16 REGARDING THEIR E.R.s. ALL THE REPORTS, EXCEPT FOR THE  
17 DEPARTMENT OF HEALTH SERVICES STATES L.A. COUNTY NEEDS A REHAB  
18 FACILITY. I HEAR THE BOARD TALKING ABOUT HAVING TO MAKE TOUGH  
19 CHOICES. CUTTING PROGRAMS FOR THE POOR AND THE DISABLED IS THE  
20 EASY CHOICE. IF YOU CAN'T FUND RANCHO, THEN, TO QUOTE  
21 SUPERVISOR YAROSLAVSKY, SPIN US OFF, SUPPORT A TRANSITION TO A  
22 NONPROFIT AS RECOMMENDED BY GILL BASANO AND OTHERS. DO WHAT IT  
23 TAKES TO SAVE RANCHO.

24

25 **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH.





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1

2 **GREG THOMPSON:** THANK YOU. [ Applause ]

3

4 **SUP. BURKE, CHAIR:** NOE HERNANDEZ, AND THEN WILLIAM HAMPTON.

5

6 **SPEAKER:** GOOD MORNING, BOARD OF SUPERVISORS. MY NAME IS  
7 ANTHONY HASHARAB. P.C.A. FOR WILLIAM HAMPTON. HE WILL BE USING  
8 HIS COMMUNICATION DEVICE AND IT TAKES JUST A MOMENT LONGER TO  
9 SPEAK THAN NORMAL. PLEASE BE PATIENT.

10

11 **BILL HAMPTON:** I'M BILL HAMPTON. THIS IS MY COMMUNICATION  
12 DEVICE. I LIVE INDEPENDENTLY IN A MODEST, ONE-BEDROOM  
13 APARTMENT ALONG WITH MY PET COCKER SPANIEL IN THE VALLEY.  
14 AFTER SUFFERING A STROKE IN 1995, WHICH RESULTED IN A YEAR IN  
15 A NURSING HOME, I WAS REFERRED TO RANCHO IN 1996 BY THE  
16 CALIFORNIA DEPARTMENT OF REHABILITATION. RANCHO INTRODUCED ME  
17 TO A NEW LINE OF TREATMENT BY SENDING ME TO ITS STROKE  
18 OUTPATIENT PROGRAM. I RECEIVED SURGERY ON MY LEFT ARM.  
19 OCCUPATIONAL PHYSICAL AND SPEECH THERAPY. PHYSICAL THERAPY  
20 DECIDED I SHOULD GET A POWER CHAIR TO GET AROUND BETTER.  
21 SPEECH THERAPY TOLD ME FROM THE START I SHOULD CONSIDER A  
22 SPEECH DEVICE, BUT I BORROWED IT A LONG TIME. I HAD TWO PHASES  
23 AND THE REALITY I ABSOLUTELY NEEDED IT. THE FEAR OF THIS CUTS  
24 ALL THIS BUT I DIDN'T. FINALLY, I DID CONCEDE TO GETTING THE  
25 SPEECH DEVICE. I HAD NO IDEA HOW MUCH BETTER IT WOULD MAKE MY



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1 LIFE. I STARTED GOING BACK TO MY A.A. MEETINGS. LAST MONTH, I  
2 CELEBRATED NINE YEARS OF SOBRIETY, BUT FIRST I CONTACTED  
3 RANCHO MY GRAND ZET CARD. I HAD TO FIND OUT HOW TO GIVE A  
4 SPEECH TO CELEBRATE THIS SOBRIETY USING MY SPEECH DEVICE. THEY  
5 TAUGHT ME HOW TO STORE A SPEECH AND WHAT TYPE OF EQUIPMENT TO  
6 USE SO I COULD BEST BE HEARD. WHAT WOULD I HAVE DONE HAD  
7 RANCHO BEEN CLOSED? RECENTLY, I REQUESTED A CUP HOLDER FOR MY  
8 CHAIR FROM THE MEDICAL SUPPLY COMPANY RANCHO ORDERED THE CHAIR  
9 FROM ORIGINALLY. THEY TOLD ME IT WOULD COST \$175 PLUS A  
10 PRESCRIPTION. I HIT THE CEILING AND TOLD THEM I WOULD EVALUATE  
11 IT WITH RANCHO. JUST AS I THOUGHT, RANCHO SHOWED ME SEVERAL  
12 DIFFERENT PICTURES OF CUP HOLDERS FOR UNDER \$10. WHAT WOULD I  
13 DO WITHOUT RANCHO LOS AMIGOS HOSPITAL? [ Applause ]

14

15 **WILLIAM HAMPTON:** IN SUMMARY, I FEEL RANCHO SHOULD BE ALLOWED  
16 TO STAY OPEN. IF THE COUNTY WON'T SUPPORT THEM, LET THEM BE A  
17 PRIVATE, NONPROFIT HOSPITAL. THANK YOU.

18

19 **SUP. BURKE, CHAIR:** THANK YOU. [ Applause ]

20

21 **SPEAKER:** [ Speaking Spanish ]

22

23 **SUP. BURKE, CHAIR:** AND STATE THE NAME OF WHO YOU'RE SPEAKING  
24 FOR.

25



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1   **SUP. MOLINA:** HE DID SAY IT. "THE NAME OF MY SON IS" [ Speaking  
2   Spanish ]

3

4   **SPEAKER:** OKAY.

5

6   **SUP. MOLINA:** THE NAME OF MY SON IS...

7

8   **SPEAKER:** [ Speaking Spanish ] [ Crying ].

9

10   **SUP. MOLINA:** ESPIRO. I ASK YOU FROM MY HEART...

11

12   **SPEAKER:** [ Speaking Spanish ]

13

14   **SUP. MOLINA:** TO PUT YOUR HAND IN YOUR HEART AND DO NOT CLOSE  
15   THE HOSPITAL. MY SON NEEDS IT. AND THANKS TO THE STAFF HE'S  
16   ALIVE.    AND THAT'S WHY I'M HERE TO SPEAK TO YOU. I WANT TO  
17   GIVE THANKS FOR ALL THE PEOPLE THAT ARE HELPING HIM. THAT IS  
18   ALL.

19

20   **SUP. BURKE, CHAIR:** THANK YOU. [ Applause ]

21

22   **SUP. BURKE, CHAIR:** MARY RIOS, ALAN TOY AND LUIS MADA. MARY  
23   RIOS, ALLEN TOY, AND LUIS MATA. WE WILL GET SOMEONE TO  
24   TRANSLATE HERE. SHE SAYS SHE'LL HAVE HIM HERE RIGHT AWAY. WELL



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1 WE ALWAYS HAVE GLORIA MOLINA, WHO'LL HELP US OUT, FORTUNATELY.

2 YES PLEASE STATE YOUR NAME.

3

4 **ALAN TOY:** MY NAME IS ALAN TOY, AND I THINK YOU ALL KNOW ME. I  
5 WANT TO THANK YOU FOR THE SUPPORT THAT YOU'VE SHOWN IN THE  
6 PAST TO THE DISABILITY COMMUNITY, BUT I'M HERE TODAY AS AN  
7 ADVOCATE AND I'M HERE AS SOMEONE WHOSE HEART IS BREAKING  
8 BECAUSE IT SEEMS THAT YOU'RE WILLING TO TURN YOUR BACKS ON THE  
9 BEATING HEART, THE POUNDING HEART OF THE DISABILITY COMMUNITY  
10 IN LOS ANGELES, WHICH IS RANCHO. FOR WHAT? A FEW MILLION  
11 DOLLARS IN NET SAVINGS EACH YEAR, MAYBE? ALLEGEDLY? BUT THOSE  
12 TALLY SHEETS HAVE BEEN COOKED AND BOILED AND SAUTEED TO COME  
13 OUT TO MAKE THE CASE THAT THE COUNTY'S ONLY RECOURSE IS TO  
14 CLOSE RANCHO. MEANWHILE, STUDIES AT MY UNIVERSITY, U.C.L.A.,  
15 HAVE SHOWN THAT MORE THAN A BILLION DOLLARS IN UNCOLLECTED  
16 TAXES EXISTS IN THIS COUNTY, UNCOLLECTED PROPERTY TAXES, AND  
17 IN RESPONSE TO THAT, SURE, YOUR ASSESSORS SAY, "OH, WELL, WE  
18 HAVE LIENS ON THOSE PROPERTIES, SO THAT MONEY'S ALL LOCKED UP  
19 AND SAFE WHEN WE GET AROUND TO COLLECTING IT," BUT FOR SEVEN  
20 LONG YEARS BEFORE THOSE LIENS ARE PUT ON THE PROPERTY, YOUR  
21 NEIGHBORHOODS ARE DETERIORATING, PEOPLE ARE LIVING IN SLUMS,  
22 YOU'RE CLOSING HOSPITALS, AND CORRUPT PROPERTY OWNERS ARE  
23 LEAVING THE COUNTY BANKRUPT. WELL, I DON'T THINK THAT'S VERY  
24 GOOD GOVERNANCE. THAT'S JUST MY OPINION, BUT I THINK YOU COULD



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1 DO A BETTER JOB OF COLLECTING TAXES SO YOU DON'T HAVE TO TAKE  
2 THESE MEASURES. [ Applause ]

3

4 **ALAN TOY:** IN CLOSING, WITH ALL DUE RESPECT, I'D LIKE TO  
5 RECOMMEND THAT YOU ADJOURN THESE HEARINGS IN THE NAME OF -- IN  
6 THE MEMORY OF COMMON DECENCY, IN THE MEMORY OF FISCAL  
7 RESPONSIBILITY, AND IN THE MEMORY OF GOVERNMENTAL INTEGRITY.  
8 THANK YOU.

9

10 **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH. [ Applause ]

11

12 **SUP. BURKE, CHAIR:** LUIS MATA, DONNA BARRAS,  
13 DR. DONNA BARRAS, BERRIS... THANK YOU.

14

15 **DR. DONNA BARRAS:** GOOD MORNING, THANK YOU FOR THE OPPORTUNITY  
16 TO SPEAK TO YOU, I'M DR. DONNA BARRAS AND I'M NOT ONLY A  
17 PERSON WHO IS POST-POLIO, WITH POLIO AT 9 MONTHS OF AGE, AND  
18 THEREFORE VERY MUCH A CONSUMER AND A WHEELCHAIR USER, BUT ALSO  
19 A PHYSICIAN WHO FOR 45 YEARS HAS WORKED WITH ALL THESE  
20 WONDERFUL PATIENTS AT RANCHO, WHERE YOU'VE SEEN THE RESULTS OF  
21 THE TREMENDOUS REHAB DONE THERE. WE STILL DO IT, WE INTEND TO  
22 DO IT IN THE FUTURE, WE HAVE PROVIDED SO MUCH FOR SO MANY OVER  
23 THE YEARS THAT IT SEEMS INCONCEIVABLE TO ME THAT YOU COULD  
24 EVEN THINK OF CLOSING IT IN ANY FASHION. SO I JUST URGE YOU TO  
25 BE THERE FOR ALL WHO ARE NOT ABLE TO SPEAK FOR THEMSELVES. I



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1 THINK THE GENTLEMAN WHO USED HIS ALTERNATIVE, AUGMENTED  
2 COMMUNICATION TO SPEAK TO YOU WAS SOMETHING NEW FOR YOU AND  
3 SOMETHING THAT YOU NEED TO SEE. THIS GOES ON EVERY DAY AT  
4 RANCHO, WHEN YOU SEE TWO SEVERELY INVOLVED PATIENTS, WITH  
5 CEREBRAL PALSY, UNABLE TO SPEAK BEING ABLE TO COMMUNICATE  
6 BETWEEN THEIR BOARDS, THEIR SPEAKING EQUIPMENT, THE  
7 ALTERNATIVE AUGMENTATIVE COMMUNICATION DEVICES. AND THE  
8 WHEELCHAIR -- THE KIDS THAT GET AN OPPORTUNITY TO BE IN A  
9 POWER WHEELCHAIR AS YOUNG AS 18 MONTHS OLD, A STUDY THAT'S  
10 BEING RUN AT RANCHO AND RESEARCH BEING DONE WILL NOW HAVE THE  
11 OPPORTUNITY TO MOVE ABOUT AND BE INVOLVED IN THEIR COMMUNITIES  
12 AND NOT ISOLATED IN SPECIAL SCHOOLS AND EVERYTHING ELSE. SO  
13 THEY'RE TAUGHT TO BE INDEPENDENT, HOPEFULLY TO GO TO WORK. AND  
14 AS YOU'VE HEARD FROM ANNIE RUTH AND BOB THONE, TWO MARVELOUS  
15 ARTISTS OF WHICH THERE ARE MANY AT RANCHO PLUS OTHER THINGS, I  
16 JUST ASK YOU FROM THE BOTTOM OF MY HEART TO REALLY RECONSIDER  
17 ALL AVENUES BEFORE YOU THINK OF CLOSING RANCHO. THANK YOU.

18

19 **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH. MARY RIOS, LUIS MATA,  
20 RUBEN RIOS. YES, MR. RIOS AND ALSO, IS MARY RIOS HERE OR? IS  
21 SHE THERE? RUBEN RIOS AND LUIS MATA.

22

23 **RUBEN RIOS:** HI, MY NAME IS RUBEN RIOS, I'M 33 YEARS OLD, I  
24 LIVE IN NORWALK. I'M A REGISTERED VOTER AND I'M JUST HERE TO  
25 KIND OF SHOW MY SUPPORT FOR RANCHO AND I THINK YOU SHOULD ALL



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1 KNOW HOW IMPORTANT IT IS. I'VE BEEN IN A WHEELCHAIR HERE FOR  
2 15 YEARS. AND I CAN HONESTLY TELL YOU THAT I WOULD NOT BE  
3 ALIVE TODAY IF RANCHO WAS NOT OPEN AT ANY TIME DURING MY LAST  
4 15 YEARS. I THINK IT SAVED MY LIFE COUNTLESS TIMES AND I KNOW  
5 THERE'S A WAY FOR YOU GUYS TO SAVE RANCHO. YOU'RE UP THERE  
6 BECAUSE YOU'RE INTELLIGENT, YOU'RE BRIGHT, YOU'RE IN THOSE  
7 POSITIONS FOR A REASON. I KNOW YOU CAN FIND A WAY TO SAVE  
8 RANCHO. I THINK JUST -- THINK BACK TO WHEN YOU WERE  
9 CAMPAIGNING FOR THOSE POSITIONS AND IF SOMEBODY WOULD'VE SAID  
10 YOU COULD HAVE THOSE POSITIONS IF YOU'D FIND A WAY TO SAVE  
11 RANCHO AND STILL TAKE CARE OF THE BUDGET, I THINK YOU WOULD'VE  
12 FOUND A WAY, AND. [ Applause ]

13

14 **SUP. BURKE, CHAIR:** YOU'RE INTERFERING WITH HIS ABILITY TO BE  
15 HEARD.

16

17 **RUBEN RIOS:** SO PLEASE KEEP THAT IN MIND AND THINK OF US, RIGHT  
18 NOW YOU'RE HOLDING A LOADED GUN IN YOUR HAND AND BY VOTING TO  
19 CLOSE RANCHO, YOU'LL BE HOLDING A SMOKING GUN IN YOUR HAND AND  
20 IT'S GOING TO COST A LOT OF LIVES, I PROMISE YOU THAT. THAT'S  
21 NOT JUST OVER EXAGGERATION OR OVER DRAMATIZATION. THANK YOU  
22 FOR LISTENING.

23

24 **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH FOR BEING HERE. BOBBI  
25 JEAN TANBERG AND GILBERT SALINAS. WOULD THEY PLEASE COME





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1 FORWARD? BOBBI JEAN TANBERG AND GILBERT SALINAS, AND AFTER  
2 THAT WE'LL BE CALLING RON MARINO AND AUDREY HAWTHORNE, IF YOU  
3 COULD BOBBI JEAN TANBERG, GILBERT SALINAS. JUAN MARINO, AUDREY  
4 HAWTHORNE. NANCY BECKER-KENNEDY. WOULD SOMEONE LET ME KNOW IF  
5 ANY OF THESE PEOPLE ARE ON THEIR WAY? [ Inaudible ].

6

7 **SUP. BURKE, CHAIR:** NANCY BUCKER-KENNEDY IS HERE. MARIA JACQUEZ  
8 WILL FOLLOW NANCY BECKER-KENNEDY. MARIA JACQUEZ AND CHRISTINA  
9 GARCIA.

10

11 **BOBBIE JEAN TANBERG:** MY NAME IS BOBBIE JEAN TANBERG. RANCHO  
12 PROVIDES HEALTH CARE FOR THE CITIZENS OF L. A. COUNTY WITH  
13 SEVERE PHYSICAL DISABILITIES, CITIZENS THAT OTHER FACILITIES  
14 REFUSE TO ADMIT OR DO THE BEST THEY CAN AND THEN THEY SEND  
15 THEM TO US. SOME PATIENTS HAVE LITTLE FINANCIAL AND EMOTIONAL  
16 SUPPORT, SOME HAVE A PERSONAL HISTORY OF TRAGEDY WHICH WE  
17 CANNOT IMAGINE. DESPITE THAT L-COM STUDIES SHOW THAT RANCHO  
18 PATIENTS PROGRESS, REQUIRING LESS ASSISTANCE AT DISCHARGE  
19 COMPARED TO OTHER REHABILITATION FACILITIES. WE HAVE SURVIVED  
20 PRIVATE HOSPITALS COMPETING FOR MEDICAL PATIENTS, BUDGET CUT-  
21 BACKS, A COUNTY CASCADE OF STAFFING AND THE RUMORS OF CLOSURE  
22 FROM '95. DESPITE THESE OBSTACLES WE MAINTAIN A HIGH SENSE OF  
23 PATIENTS WITH MORE PATIENTS WAITING TO BE ADMITTED. TWO  
24 INDEPENDENT FINANCIAL FEASIBILITY STUDIES HAVE STATED THAT  
25 GIVEN THE OPPORTUNITY RANCHO HAS THE ABILITY TO CONTINUE TO



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1 PROVIDE SERVICES WITHOUT LONG-TERM COUNTY SUPPORT. RANCHO HAS  
2 BEEN CALLED THE JEWEL OF L. A. COUNTY. WE HAVE PROVIDED  
3 CITIZENS WITH NATIONALLY RECOGNIZED EXCELLENCE IN HEALTH CARE  
4 FOR OVER 75 YEARS. NOW IT'S TIME FOR THE LOS ANGELES COUNTY  
5 BOARD OF SUPERVISORS TO SHOW RANCHO AND MORE IMPORTANTLY THE  
6 CITIZENS OF L. A. COUNTY A LITTLE RESPECT. RANCHO  
7 ADMINISTRATION AND STAFF WOULD LIKE TO ONCE AGAIN BEAT THE  
8 ODDS ALONG WITH OUR PATIENTS. RANCHO PATIENTS AND STAFF DO NOT  
9 QUIT. COUNTY BOARD OF SUPERVISORS, I ASK THAT YOU SHOW THE  
10 SAME COURAGE AS OUR PATIENTS. I AM REQUESTING THAT YOU AMEND  
11 YOUR DECISION TO CLOSE RANCHO AND ALLOW US TO TRANSITION TO A  
12 NONPROFIT HOSPITAL. THANK YOU.

13

14 **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH. [ Applause ].

15

16 **SUP. BURKE, CHAIR:** AFTER NANCY BECKER-KENNEDY, MARIA JACQUEZ  
17 AND CHRISTINA GARCIA. YES, STATE YOUR NAME, PLEASE.

18

19 **AUDREY HAWTHORNE:** GOOD AFTERNOON, LADIES AND GENTLEMEN. MY  
20 NAME IS AUDREY HAWTHORNE. AND ALMOST TWO YEARS AGO I HAD  
21 SUFFERED BRONCHITIS. THE BRONCHITIS NEVER FULLY WENT AWAY;  
22 INSTEAD IT METAMORPHOSED INTO SOME FORM OF LUNG DISEASE THAT  
23 IS STILL UNDETERMINED. SEVERAL MONTHS AGO DURING THE SUMMER I  
24 MET A DOCTOR WHO AT ONE POINT HAD BEEN AFFILIATED WITH RANCHO  
25 LOS AMIGOS. WE HAD DISCUSSED YESTERDAY FINALIZATION OF SOME



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1 FORM OF TREATMENT, AND WHICH RANCHO WILL NOW BECOME A PART OF.  
2 LUNG DISEASE FOR PEOPLE WITH DISABILITIES IS MUCH MORE  
3 DANGEROUS AS WELL AS IT WOULD BE FOR THE GENERAL POPULATION.  
4 IT IS -- [ Inaudible ]

5

6 **AUDREY HAWTHORNE:** THANK YOU. IT IS IMPERATIVE TO TREAT IT  
7 AGGRESSIVELY IN ORDER FOR THE PATIENT OR THE INDIVIDUAL TO  
8 CONTINUE TO MEET WITH THEIR LIFE. I'VE BEEN FORTUNATE SINCE  
9 THEN TO HAVE FAIRLY GOOD HEALTH AND MANY MEMBERS OF MY FAMILY  
10 HAVE LIVED TO A RIPE OLD AGE. I INTEND TO CONTINUE TO DO SO  
11 BUT IT CAN'T BE DONE UNLESS THERE'S ADEQUATE HEALTH CARE  
12 PROVIDED. DURING THOSE TWO YEARS I WENT THROUGH THE MAINSTREAM  
13 MEDICAL COMMUNITY IN WHICH THEY COULD NOT HELP ME. UPON  
14 FINDING THE INDIVIDUALS THAT I NEEDED AND BEING ABLE TO GO  
15 BACK TO RANCHO, I KNOW AND I HAVE HOPE THAT I CAN CONTINUE  
16 FORWARD. SPEAKING AS I DO NOW PUTS A GREAT DEAL OF PRESSURE ON  
17 MY CHEST AND BREATHING. IT IS IMPERATIVE THAT I GET MY MEDICAL  
18 TREATMENT, AS WELL AS THE OTHER INDIVIDUALS. IT IS APPALLING  
19 WHEN PEOPLE DECIDE TO TAKE DISCRETIONARY FUNDS AND PLACE THEM  
20 ELSEWHERE. RANCHO IS NOT ONLY A CIVIL RIGHTS FORM OF KEEPING  
21 OUR MEDICAL THINGS TOGETHER BUT IT IS A NECESSITY FOR ALL OF  
22 US. PLEASE, PLEASE DO NOT ALLOW RANCHO TO BE CLOSED. THANK  
23 YOU.

24

25 **SUP. BURKE, CHAIR:** THANK YOU. [ Applause ].



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1

2 **SUP. BURKE, CHAIR:** GARRETT PACO AND UMBERTO JIMINEZ WILL BE  
3 THE PEOPLE THAT ARE CALLED AFTER THE SPEAKERS THAT ARE HERE.

4

5 **JUAN MORENO:** MY NAME IS JUAN MORENO. I WANT TO THANK YOU FIRST  
6 OF ALL FOR ALLOWING ME TO SHARE AND BE HERE TODAY. OUR PLEA IS  
7 SIMPLE, NOW KEEP RANCHO OPEN, THAT'S WHAT WE'RE HERE FOR. I  
8 WORK AS A DISABILITY ADVOCATE FOR THE COMMUNITY REHABILITATION  
9 SERVICES. WE SERVE THE EAST LOS ANGELES AREA. WE PROVIDE  
10 LIVING SKILLS AND SERVICES FOR THE DISABLED COMMUNITY, MOST OF  
11 WHOM ARE RANCHO LOS AMIGOS CENTER PATIENTS. RANCHO'S SERVICES  
12 AND PROGRAMS HAVE ALLOWED ME TO GO ON TO COLLEGE AND BECOME  
13 EMPLOYED. NOW WHEN I SAY ALLOWED I REFER TO RANCHO BEING  
14 AVAILABLE TO ME AND THOUSANDS OF OTHER PEOPLE. THIS IS PROOF  
15 BEFORE YOUR EYES, THIS IS EVIDENCE THAT RANCHO IS VERY  
16 IMPORTANT TO ALL OF US AND THERE ARE SO MANY THAT WEREN'T ABLE  
17 TO BE HERE BEFORE US TODAY TO SHARE THEIR TESTIMONY AND HOW  
18 SERIOUS RANCHO IS. FOR THE SEVERELY DISABLED IF RANCHO CLOSES  
19 THE SIMPLE FACT IS THAT RANCHO THEIR LIVES ARE JEOPARDIZED.  
20 IT'S GOING TO BE EXTREMELY DETRIMENTAL TO THEIR HEALTH, BUT  
21 RANCHO BEING AVAILABLE TO THEM HAS -- IN OTHER WORDS THEIR  
22 LIFE EXPECTANCY HAS SURPASSED THE EXPECTATIONS OF MANY PEOPLE  
23 OR MY OTHER PHYSICIANS, I'M SURE. ONE THING I DIDN'T MENTION  
24 BEFORE I WANT TO APPLAUD DON KNABE, SUPERVISOR KNABE FOR YOUR



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1 SUPPORT IN THIS ISSUE. WE APPLAUD YOU AND I WOULD LIKE TO

2 THANK YOU FOR THAT. [ Applause ].

3

4 **JUAN MORENO:** AND AGAIN RANCHO HAS BEEN INSTRUMENTAL IN MY  
5 SUCCESS IN BECOMING EMPLOYED. WE ALL KNOW THAT WE NEED GOOD  
6 HEALTH TO BE EMPLOYED. WITHOUT RANCHO MY HEALTH MIGHT GO DOWN  
7 AND MIGHT BE NEARLY IMPOSSIBLE FOR ME TO MAINTAIN EMPLOYMENT  
8 SO ONE THING WE NEED TO CONSIDER, WE NEED TO THINK ABOUT IS  
9 THAT EVERY SINGLE ONE OF THE INDIVIDUALS HERE WITHOUT A  
10 DISABILITY COULD WALK OUT THE DOOR, YOU COULD GO HOME TONIGHT,  
11 YOU COULD BE BEAT AND YOU GET A SERIOUS INJURY, BE IN A  
12 SERIOUS ACCIDENT WHICH MAY BE -- YOU MAY BE -- AND YOU MIGHT  
13 END UP WITH A DISABILITY WHICH MIGHT -- AND ALL, YOU MIGHT  
14 NEED RANCHO. SO I JUST WANT YOU TO THINK OF ABOUT, YOU'RE  
15 GOING TO NEED RANCHO, EVERYBODY NEEDS RANCHO. IT IS NOT JUST  
16 NOT, YOU KNOW, JUST HAVE SOLUTIONS, -- COME UP WITH DIFFERENT  
17 ALTERNATIVES BUT DON'T CLOSE RANCHO, THANK YOU.

18

19 **SUP. BURKE, CHAIR:** PLEASE STATE YOUR NAME.

20

21 **MARIA JACQUEZ:** GOOD AFTERNOON, MY NAME IS MARIA JACQUEZ. I  
22 HAVE BEEN A RANCHO OUTPATIENT FROM THE AGE OF 8 AND I'M ALSO  
23 AN EMPLOYEE. I AM ALSO THE PRESIDENT AND THE FOUNDER OF BOTH  
24 THE WOMEN'S WELLNESS EDUCATIONAL GROUP FOR WOMEN WITH SPINAL  
25 CORD INJURIES AND HISPANIC WOMEN WITH DISABILITIES FOUNDATION.



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1 WE HAVE COLLECTED 9,000 SIGNATURES OPPOSING TO CLOSE RANCHO  
2 LOS AMIGOS NATIONAL REHABILITATION CENTER AND HAVE BROUGHT  
3 THEM FOR YOU TODAY. [ Applause ].

4

5 **SUP. BURKE, CHAIR:** CONTINUE WITH YOUR STATEMENT. ALL RIGHT,  
6 YOU KNOW WHAT HAPPENS IS YOU CUT OFF HER TIME, WHICH IS  
7 UNFAIR. LET HER SPEAK AND WE WANT TO GIVE HER HER FULL TIME.

8

9 **MARIA JACQUEZ:** I ONLY HAVE ONE COMMENT TO SAY. IF YOU DECIDE  
10 TO CLOSE RANCHO LOS AMIGOS NATIONAL REHABILITATION CENTER,  
11 MANY PEOPLE WITH SPINAL CORD INJURIES LIKE MYSELF WILL SURELY  
12 DIE. I ASK THAT YOU PLEASE LOOK INTO YOUR HEARTS AND DO NOT  
13 ALLOW THIS TO HAPPEN. THANK YOU.

14

15 **SUP. BURKE, CHAIR:** THANK YOU. WOULD YOU STATE YOUR NAME,  
16 PLEASE.

17

18 **CHRISTINA GARCIA:** MY NAME IS CHRISTINA GARCIA. RANCHO LOS  
19 AMIGOS REHABILITATION MEDICAL CENTER IS NOT AS SIMPLE AS JUST  
20 ANOTHER COUNTY MEDICAL CENTER YOU WISH TO CLOSE. RANCHO IS A  
21 FACILITY THAT SPECIALIZES IN REHABILITATION TO ANY PERSON WITH  
22 A DISABILITY. EVERY PATIENT RECEIVES THE QUALITY OF  
23 SPECIALIZED CARE REGARDLESS OF FINANCIAL OR INSURANCE STATUS.  
24 RANCHO'S GOAL HAS ALWAYS BEEN TO HELP PATIENTS, ENABLING THEM  
25 TO LIVE LIFE TO THE FULLEST. I HAVE BEEN A PATIENT SINCE 1965



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1 AT AGE FIVE, BORN WITH SPINABIFFIDA, MY LIFE EXPECTANCY WAS  
2 AGE 13. BUT BECAUSE OF RANCHO'S SPECIALIZED CARE I LIVE  
3 INDEPENDENTLY, WORK FULLTIME AND ON MY NEXT BIRTHDAY I WILL BE  
4 43. CLOSING RANCHO WILL BE DEVASTATING, POSSIBLY LIFE  
5 THREATENING TO MYSELF AND TO OTHER COUNTLESS AMOUNT OF PEOPLE  
6 WITH DISABILITIES IN OUR FUTURE THAT DESERVE BUT WILL NOT  
7 RECEIVE THE KIND OF CARE I HAVE. PREVENTING US TO LIVE OUR  
8 LIVES TO THE BEST OF OUR ABILITY AND OUR LIVES IS A TERRIBLE  
9 THING TO WASTE. THANK YOU FOR LISTENING.

10

11 **SUP. BURKE, CHAIR:** THANK YOU. JANET PECO AND UMBURTO JIMENEZ,  
12 IF YOU ARE HERE PLEASE COME FORWARD. IF NOT, SUZANNE RHODE AND  
13 MICHAEL ROMERO, WOULD YOU PLEASE COME FORWARD. AND THEN WE'RE  
14 GOING TO CALL FLORES, WELL I THINK IT'S MOSES FLORES. AND THE  
15 NURSE WILL SPEAK FOR HIM. SUZANNE RHODA AND MICHAEL ROMERO.  
16 OKAY. THEY'RE COMING. AND THE LAST TWO PEOPLE WE'LL BE CALLING  
17 IN THIS GROUP WILL BE NICHOLAS DEWITT AND HUGH HENDENBURG. IF  
18 YOU'D LIKE TO START. TELL HIM TO COME ON FORWARD. MOSES FLORES  
19 -- HUM? [ Inaudible ].

20

21 **SUP. BURKE, CHAIR:** ALL RIGHT. ALL RIGHT. WOULD YOU LIKE TO  
22 START? DO YOU WANT THEM TO GO FIRST?

23

24 **MOSES FLORES:** I WANT TO FAMILIARIZE MYSELF.

25





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1    **SUP. BURKE, CHAIR:** ALL RIGHT.

2

3    **MOSES FLORES:** MY NAME IS MOSES FLORES, I'M 20 YEARS OLD AND --

4

5    **SUP. BURKE, CHAIR:** COULD WE PLEASE HAVE EVERYONE QUIET PLEASE?

6

7    **MOSES FLORES:** MY NAME'S MOSES FLORES, I'M 20 YEARS OLD AND

8    I'VE BEEN A PATIENT AT RANCHO SINCE I WAS 13. AND I WOULDN'T

9    BE HERE IF IT WASN'T FOR MY DOCTORS AT RANCHO I WOULDN'T BE

10    ALIVE. SO BREAKING MY HEART IF RANCHO CLOSES BECAUSE THEY'RE

11    KEEPING ME ALIVE.

12

13    **LaVERN GREEN:** MOSES IS PRETTY NERVOUS NOW BUT I'M LaVERN GREEN

14    AND I'M HIS NURSE THAT TRAVELS HOME WITH HIM. AND I'VE BEEN

15    FOLLOWING MOSES FOR NEARLY A YEAR. AND OVER IN RANCHO THEY

16    HAVE PROVIDED HIM EXCELLENT CARE. MOSES IS A MUSCULAR

17    DYSTROPHY PATIENT AND HE HAS FREQUENTLY PNEUMONIA. AND WITHOUT

18    BEING AT RANCHO AND HAVING THE CONSTANT TREATMENT AND THE

19    NURSES AND HIS DOCTOR GILMORE AND OTHER STAFF MEMBERS WORKING

20    WITH HIM, HE WOULD NOT BE ALIVE TODAY. YOU CAN SEE HE'S ON A

21    VENTILATOR THAT KEEPS HIM BREATHING AND HE REQUIRES LOTS OF

22    TREATMENT. AND ALSO WHAT HE HAS DONE, WHICH IS SO

23    TREMENDOUSLY, THIS YEAR HE'S ALSO IS ATTENDING CERRITOS

24    COLLEGE, WHICH IS AT THE RANCHO LOCATION.

25



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1    **SUP. BURKE, CHAIR:** THAT'S WONDERFUL.

2

3    **LaVERN GREEN:** AND THIS IS JUST A TREMENDOUS PROGRESS FOR MOSES  
4    AND I'M ALL EXCITED TO BE WORKING WITH HIM OVER AT RANCHO.

5

6    **SUP. BURKE, CHAIR:** THAT'S MARVELOUS, WONDERFUL. YOU REALLY  
7    HAVE A LOT OF STRENGTH, TO BE COMMENDED.

8

9    **LaVERN GREEN:** THANK YOU, JUST KEEP RANCHO OPEN.

10

11    **NANCY BECKER-KENNEDY:** DEAR HONORABLE MEMBERS OF THE BOARD OF  
12    SUPERVISORS OF LOS ANGELES COUNTY, ON BEHALF OF THE PERSONAL  
13    ASSISTANCE SERVICES COUNCIL I WISH TO SPEAK WITH YOU TODAY. IT  
14    IS THE MISSION OF THE PERSONAL ASSISTANT SERVICES --.

15

16    **SUP. BURKE, CHAIR:** AND YOUR NAME IS?

17

18    **NANCY BECKER-KENNEDY:** OH MY NAME IS NANCY BECKER-KENNEDY, I'M  
19    CHAIR OF THE PERSONAL ASSISTANT SERVICES COUNCIL -- I'M CHAIR  
20    OF THE SERVICE ENHANCEMENT DELIVERY. IT'S THE MISSION OF THE  
21    PERSONAL ASSISTANCE SERVICES COUNCIL TO IMPROVE THE LIVES OF  
22    ALL WHO USE AND PROVIDE IN-HOME SUPPORTED SERVICES. MOST OF  
23    OUR P.A.S.C. CONSUMER BOARD MEMBERS, AS WELL AS MANY OF OUR  
24    125,000 IN-HOME-SUPPORTED SERVICES CLIENTS WHOM WE ARE  
25    APPOINTED BY YOU TO SERVE CAME THROUGH RANCHO LOS AMIGOS



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1 HOSPITAL AND RELY ON IT TO CONTINUE TO LIVE INDEPENDENTLY IN  
2 LOS ANGELES COUNTY OUTSIDE OF INSTITUTIONS. OUR CLIENTS ON  
3 RESPIRATORS FOR EXAMPLE LIVE IN CLUSTERS AROUND RANCHO LOS  
4 AMIGOS HOSPITAL BECAUSE THE PULMONARY UNIT WHERE THEY CAN  
5 RECEIVE ONE OF MANY SPECIALIZED OUTPATIENT SERVICES, THEY  
6 CANNOT BE FOUND ANYWHERE ELSE IN THE COUNTY OR EVEN IN OTHER  
7 STATES. THE INDEPENDENT LIVING OF OUR CONSUMERS IN ECONOMIC  
8 TERMS SAVES LOS ANGELES COUNTY AND THE STATE OF CALIFORNIA  
9 MILLIONS OF DOLLARS IN COSTLY INSTITUTIONALIZATION. THE VALUE  
10 OF LIVING FREE LIVES OUTSIDE OF INSTITUTIONS IN HUMAN TERMS IS  
11 INCALCULABLE. WE APPRECIATE THE EXTREMELY DIFFICULT POSITION  
12 IN WHICH YOU FIND YOURSELVES, HOWEVER WE DON'T KNOW IF YOU'RE  
13 AWARE OF HOW DEVASTATING THE CLOSING OF RANCHO LOS AMIGOS  
14 HOSPITAL WOULD BE NOT ONLY TO PEOPLE WHO HAVE DISABILITIES NOW  
15 BUT ALSO THE CITIZENS OF LOS ANGELES COUNTY WHO ARE NOT NOW  
16 DISABLED. IN RECENT YEARS PEOPLE WITH NEWLY DISABLING  
17 CONDITIONS DUE TO STROKE, ACCIDENTS OR MERELY A SENIOR  
18 BREAKING A HIP ARE OFTEN DISCHARGED DIRECTLY TO NURSING HOMES,  
19 REGARDLESS OF THEIR AGE OR THE ABILITY TO BE REHABILITATED AND  
20 RETURNED HOME TO ACTIVE, VITAL LIVES IN THE COMMUNITY. IF  
21 RANCHO LOSS AMIGOS HOSPITAL IS PERMITTED TO CLOSE, COUNTLESS  
22 CITIZENS OF LOS ANGELES COUNTY WILL LOSE THEIR FREEDOM TO LIVE  
23 IN THEIR HOMES DECADES BEFORE THIS IS NECESSARY. AND IN  
24 VIOLATION OF THE OLMSTEAD SUPREME COURT DECISION ENSURING THE  
25 RIGHTS OF ALL LIVES OUTSIDE OF INSTITUTIONS. NOT ONLY WILL



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1 THIS ROB THOUSANDS OF CURRENT AND FUTURE CITIZEN OF LOS  
2 ANGELES COUNTY OF THEIR FREEDOM BUT IT COULD START A TERRIBLE  
3 SHOCK WAVE THROUGH THE NATION. IF AN INTERNATIONALLY RENOWNED  
4 REHABILITATION CENTER OF THE MAGNITUDE OF RANCHO LOSS AMIGOS  
5 HOSPITAL IN THE NATION'S MOST PROGRESSIVE CITY IS PERMITTED TO  
6 CLOSE, PEOPLE WILL BE INSTITUTIONALIZED THROUGHOUT THE NATION  
7 AS THE REHABILITATION NECESSARY TO LIVE ONE'S LIVES IN ONE'S  
8 HOME EVAPORATES. ON BEHALF OF 125,000 I.H.S.S. CLIENTS WE  
9 SERVE, MANY OF WHOM COULD NOT CONTINUE TO LIVE INDEPENDENTLY  
10 IN THE COMMUNITY WITHOUT RANCHO LOS AMIGOS SPECIALIZED  
11 OUTPATIENT SERVICES AND ON BEHALF OF UNTOLD NUMBERS OF  
12 CITIZENS WHO WILL SOMEDAY NEED THIS REHABILITATION TO ADJUST  
13 TO THE AGING PROCESS OR TRAUMA, WE ENTREAT YOU TO DO WHATEVER  
14 IS NECESSARY TO KEEP RANCHO LOS AMIGOS HOSPITAL OPEN.

15  
16 **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH. WOULD YOU GIVE US YOUR  
17 NAME, SIR. THANK YOU.

18  
19 **DAVID WOLF:** THANK YOU. MY NAME IS DAVID WOLF. I WORK ACROSS  
20 THE STREET AT THE CITY OF LOS ANGELES. BUT I KEEP THE CITY  
21 VERY WELL OCCUPIED. AS COMMISSIONER OF DISABILITY, I'M  
22 SPEAKING FOR MYSELF AS AN INDIVIDUAL. NO ONE -- I THINK THE  
23 PEOPLE WHO CAME BEFORE ME, BEFORE, HAVE STATED MORE ELOQUENTLY  
24 THAN I COULD STATE ANYTHING. BUT I ASK THE BOARD OF  
25 SUPERVISORS TO THINK ABOUT THIS ISSUE. IF YOU CLOSE THIS



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1 HOSPITAL AND REDUCE THE NUMBER OF BEDS AT COUNTY U.S.C., THESE  
2 INDIVIDUALS WILL NOT JUST EVAPORATE. THE COUNTY AND COUNTY  
3 SERVICES WILL NEED TO TAKE CARE OF THIS CONSTITUENCY. YOU WILL  
4 JUST BE SHIFTING THE COST INTO SOME OTHER LOCATION AND YOU'LL  
5 HAVE TO DEAL WITH IT DOWN THE LINE. MY NEXT POINT IS, BY  
6 REDUCING THE NUMBER OF HOSPITAL BEDS, ISN'T L. A. COUNTY BEING  
7 PUT INTO POSSIBLE DANGER BY A POTENTIAL -- BY A POTENTIAL  
8 TERRORIST ATTACK IF THERE IS SUCH? IN FACT CAN THIS COUNTY  
9 DEAL WITH POTENTIAL DANGER? AND I DON'T THINK BY CUTTING DOWN  
10 ON THE NUMBER OF BEDS OR BY CLOSING UP HOSPITALS WE'RE SENDING  
11 A VERY GOOD SIGNAL ACROSS THE NATION AND ACROSS THE WORLD THAT  
12 WE'RE CAPABLE OF DEALING WITH AN ISSUE AND CAPABLE OF DEALING  
13 WITH THIS VERY SERIOUS ISSUE. THANK YOU.

14

15 **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH. [ Applause ].

16

17 **SUP. BURKE, CHAIR:** IS SUSAN RODER HERE? ALL RIGHT, SUSAN  
18 RODER.

19

20 **SUSAN RODER:** MY NAME IS SUSAN RODER. THE FIRST THING I WOULD  
21 LIKE TO SAY IS THANK YOU VERY MUCH FOR ALLOWING ME TO SPEAK. I  
22 WAS INTRODUCED TO RANCHO IN 1966. MY GENERAL ORTHOPEDIC DOCTOR  
23 TOLD ME I HAD DEVELOPED SCOLIOSIS AND TOLD ME THERE WASN'T ANY  
24 EXPERTISE TO SAVE ME WITH THIS CONDITION. HE DID SEND ME TO  
25 RANCHO LOS AMIGOS AT THAT TIME I WAS 10 YEARS OLD. FROM THAT



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1 TIME SPAN I SPENT THREE AND A HALF YEARS OF MY LIFE LIVING AT  
2 RANCHO. I HAVE BEEN GOING THERE EVER SINCE THEN. TWO YEARS AGO  
3 I WAS TOLD THAT I NEEDED A BOOKER URINARY DIVERSION. I WENT TO  
4 ONE HOSPITAL, TO ANOTHER HOSPITAL, TO ANOTHER HOSPITAL. I ONLY  
5 HAVE MEDICAL. I AM A VERY COMPLEX CASE BECAUSE OF MY SEVERE  
6 CEREBRAL PALSY. I WAS BORN FIVE MONTHS PREMATURE, ONE POUND,  
7 FIVE OUNCES. NO DOCTOR WILL PUT THEIR HANDS ON ME BECAUSE OF  
8 HIGH RISK OF ALLERGIES TO MEDICINE AND OTHER MEDICAL  
9 COMPLICATIONS. I AM NOT ONLY HERE ON BEHALF OF MYSELF TODAY  
10 BUT ON BEHALF OF ALL THE PEOPLE, INCLUDING MY PEERS, WHOM I  
11 HAVE SHARED ROOMS WITH FOR ALL THESE YEARS, AND WE HAVE BECOME  
12 ROOMMATE FRIENDS AND FAMILY. RANCHO IS MY HOME AWAY FROM MY  
13 HOME. BECAUSE OF RANCHO, AT THE AGE OF 21 I WAS TOLD IF I DO  
14 NOT HAVE THESE TREATMENTS I WOULD BE BED-BOUND FOR THE REST OF  
15 MY LIFE BECAUSE I'M SO SEVERE AND THEY WERE WILLING TO TAKE  
16 THE RISK WITH ME I AM SITTING HERE TODAY PROUDLY TO SPEAK TO  
17 YOU, TO TELL YOU MY STORY AND TELL YOU THAT I LIVE  
18 INDEPENDENTLY TOO. [ Inaudible ] FRIENDS TO TAKE IN COMPANY.  
19 IT'S A EQUAL OPPORTUNITY OF MINE. I ASK YOU JUST FOR ONE  
20 SECOND TO CLOSE YOUR EYES AND ASK YOURSELF WHAT WOULD YOU DO  
21 IF IT WAS ONE OF YOURS, AND IN CLOSING I TELL YOU ONLY THROUGH  
22 DISABILITIES AND PEOPLE'S ATTITUDES. THANK YOU.

23

24 **SUP. BURKE, CHAIR:** THANK YOU. YES, SIR.

25



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1   **MICHAEL ROMERO:** MY NAME'S MICHAEL ROMERO, I'M AN IN-PATIENT IN  
2   RANCHO LOS AMIGOS. MS. GLORIA MOLINA, I'M -- YOU REPRESENT MY  
3   CITY AND ALSO I KNOW YOUR FIELD DEPUTY ALAN BADA REALLY GOOD,  
4   A BEST FRIEND OF MINE, AND I JUST WANT TO TELL YOU ALL THAT  
5   RANCHO LOS AMIGOS, IF IT WASN'T FOR RANCHO LOS AMIGOS I THINK  
6   I WOULD'VE BEEN DEAD. I CAME OUT OF A -- I WAS SHOT IN THE  
7   NECK AND THEN AFTER THAT I RECOVERED SO WELL THAT THE HELP  
8   FROM THE PT AND THE OT'S AND THE NURSING STAFF IN RANCHO, THEY  
9   REALLY HELPED ME THROUGH. AND I SEE THEM HELPING A LOT OF  
10  PEOPLE, THROUGH. I WANT TO TELL YOU THIS STORY. THERE WAS THIS  
11  MAN WALKING DOWN THE ROAD. AND THEN HE WAS ROBBED AND HE LEFT  
12  THEM -- THEY ROBBED HIM AND HE WAS LEFT TO DIE. AND THERE WAS  
13  THREE PEOPLE WALKING BY, ONE WAS A PRIEST WALKING BY AND HE  
14  JUST LEFT HIM ALONE. AND THE OTHER WAS A LEVI. HE LEFT HIM --  
15  HE WALKED ON BY AND LET HIM GO. ANOTHER ONE WAS A GOOD  
16  SAMARITAN. AND THE GOOD SAMARITAN HELPED HIM UP, GOT HIM UP  
17  AND THEN HELPED HIM 'TIL THE END, AND PAID FOR THE WAGES OF  
18  THE HOTEL TO STAY AT. I ALSO -- ALL THESE PEOPLE ARE HERE.  
19  THEY ARE GOOD SAMARITANS JUST LIKE THAT MAN. AND THEN I WANT  
20  TO JUST ASK YOU, YOU JOIN IN BEING THE GOOD SAMARITANS, ALSO.  
21  I DON'T MEAN THAT -- WE HAVE THE CITY OF ANGELS IN L. A. BUT  
22  WE HAVE THE CITY OF ANGELS IN RANCHO LOS AMIGOS. THANK YOU  
23  VERY MUCH. I'D LIKE TO -- I GOT LETTERS, 2,000 LETTERS TO  
24  REPRESENT FOR THE RANCHO. THANK YOU.

25





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1   **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH. YES SIR, STATE YOUR  
2   NAME.

3

4   **NICHOLAS DEWITT:** MY NAME IS NICHOLAS DEWITT. I WANT TO THANK  
5   YOU FOR THE TIME YOU'VE GIVEN ME TODAY. I'M SPEAKING OBVIOUSLY  
6   IN OPPOSITION OF CLOSING RANCHO. I SPEAK FROM PERSONAL  
7   EXPERIENCE. I WAS A PATIENT AT RANCHO LOS AMIGOS FROM DECEMBER  
8   1968 THROUGH APRIL OF 1969, SO TO BE DOING YOUR MATH, WAS 35  
9   YEARS AGO AND LEST YOU THINK MY RANCHO EXPERIENCE ENDED AT  
10   THAT POINT IN TIME, IT DID NOT. I HAVE BEEN AN OUTPATIENT AT  
11   RANCHO LOS AMIGOS THROUGHOUT THE LAST 35 YEARS, I STILL CARRY  
12   MY RANCHO CARD, PATIENT NUMBER 80933 IN MY BRIEFCASE AND IT  
13   HAS BEEN A SOURCE OF GREAT INFORMATION AND STRENGTH FOR ME  
14   DURING THAT WHOLE PERIOD OF TIME. JUST BRIEFLY, WHEN I WAS 18  
15   YEARS OLD I LIVING IN INDIANA, I HAD A TUMOR IN MY SPINE. I  
16   CAME OUT HERE FOR SURGERY AND WAS GIVEN THE GIFT OF LIFE AS A  
17   RESULT OF THE SURGERY AND WAS ASKED TO GO TO RANCHO HOSPITAL  
18   FOR REHABILITATION. THE SURGERY LEFT ME A PARAPLEGIC. AT THE  
19   SAME TIME MY PARENTS WERE IN THE MIDDLE OF A DIVORCE, I WAS  
20   OUT HERE ALL BY MYSELF AT AGE 18 AND MY MOTHER HAD TO GO BACK  
21   HOME TO TAKE CARE OF THREE YOUNGER CHILDREN, MY BROTHERS AND  
22   SISTERS. AND ALTHOUGH I WAS ALONE, RANCHO PROVIDED TO ME, AS  
23   IT HAS FOR THOUSANDS OF OTHERS, A TEMPORARY HOME. RANCHO ALSO  
24   PROVIDED ME WITH INFORMATION WHICH HAS LASTED A LIFETIME. THEY  
25   PROVIDED LOVE AND SUPPORT FOR ALL OF THEIR INJURED PATIENTS



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1 ALONG A BROAD RANGE OF DISABILITIES, THEY TAUGHT ME THE  
2 BASICS, FROM KNOWING HOW TO USE A WHEELCHAIR, HOW TO TRANSFER  
3 TO THE BED, THE SHOWER, THE BATHROOM, THE CAR, HOW TO PICK  
4 YOURSELF UP IF YOU FELL DOWN, HOW TO JUMP A CURB BEFORE THE  
5 DAYS OF CURB CUTS, HOW TO DRIVE, HOW TO AVOID PRESSURE SORES,  
6 WHAT KIND OF CUSHION TO USE, HOW TO AVOID BLADDER INFECTIONS,  
7 HOW TO USE THE BATHROOM, THEY COUNSELED ME AND MY PARENTS ON  
8 HOW TO ADAPT, WHAT TO EXPECT, PSYCHOLOGICAL ISSUES, HOW TO  
9 DEAL WITH BENEFITS AND MONEY. BUT MOST OF ALL RANCHO PROVIDED  
10 A SUPPORT TO ME, THEY NEVER FELT SORRY FOR THE PATIENTS THERE.  
11 THEY TAUGHT THEM HOW TO GO ON WITH THEIR LIFE, WHICH I DID,  
12 GOING ON TO GRADUATE FROM LAW SCHOOL HERE IN LOS ANGELES,  
13 MARRYING ONE OF THE NURSES I MET AT RANCHO, AND WE'VE BEEN  
14 MARRIED NOW FOR 28 YEARS. [ Applause ].

15

16 **NICHOLAS DEWITT:** I WENT ON TO BECOME A FEDERAL PROSECUTOR HERE  
17 IN LOS ANGELES, BE A MEMBER OF A PRIVATE LAW FIRM, AND NOW  
18 HAVE MY OWN LAW FIRM. THE LESSON HERE IS NOT THAT EVERYONE WHO  
19 GOES TO RANCHO WILL BECOME A LAWYER, GOD KNOWS WE DON'T ALL  
20 WANT THAT [ Laughter ].

21

22 **NICHOLAS DEWITT:** BUT THE LESSON IS THAT EVERYBODY WHO GOES TO  
23 RANCHO COMES OUT OF THERE BETTER THAN THEY WOULD HAVE BEEN  
24 OTHERWISE. [ Applause ] AND I JUST WANT TO CHALLENGE YOU AS  
25 POLITICIANS -- I KNOW MY TIME IS UP. BUT CHALLENGE YOU AS



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1 POLITICIANS. I HAVE TWO PEOPLE SOMEWHAT ON DIFFERENT POLITICAL  
2 SPECTRUMS, JOHN KENNEDY AND RONALD REAGAN. JOHN KENNEDY WHEN  
3 HE WAS FIRST ELECTED PRESIDENT SAID TO A GROUP OF POLITICIANS,  
4 HE SAID "WHEN AT SOME FUTURE DATE THE HIGH COURT OF HISTORY  
5 SITS IN JUDGMENT OF EACH OF US, OUR SUCCESSES, OUR FAILURES IN  
6 WHOEVER OFFICE WE MAY HOLD, OUR SUCCESS WILL BE MEASURED BY  
7 THE ANSWERS TO FOUR QUESTIONS: WERE WE TRULY POLITICIANS OF  
8 COURAGE, WERE WE TRULY POLITICIANS OF JUDGMENTS, WERE WE TRULY  
9 POLITICIANS OF INTEGRITY, AND WERE WE TRULY POLITICIANS OF  
10 DEDICATION." RONALD REAGAN IN HIS FIRST INAUGURAL ADDRESS AS  
11 PRESIDENT SAID "THE CRISIS WE ARE FACING TODAY REQUIRES OUR  
12 BEST EFFORTS AND OUR WILLINGNESS TO BELIEVE IN OURSELVES AND  
13 TO BELIEVE IN OUR CAPACITY TO PERFORM GREAT DEEDS, TO BELIEVE  
14 THAT TOGETHER WE CAN HELP AND RESOLVE THE PROBLEMS THAT NOW  
15 CONFRONT US. AFTER ALL, WHY SHOULDN'T WE BELIEVE THAT, WE ARE  
16 AMERICANS." YOU MUST KEEP RANCHO OPEN.

17  
18 **SUP. BURKE, CHAIR:** THANK YOU. NOW JOE TUSIA, I JUST GOT THIS  
19 CARD FOR JOE TUSIA AND HUGH HENBURG. NOW, ARE THEY HERE? HUGH  
20 HENBURG - HINDINBERG.

21  
22 **HOLLANDBERG:** HOLLANDBERG.

23  
24 **SUP. BURKE, CHAIR:** HOLLANDBERG, AND JOE TUSIA. TUSIA? AND  
25 AFTER THEY SPEAK WE WILL CALL UP THE REPRESENTATIVE FROM THE



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1 OFFICE OF ASSEMBLYMAN MARCO FIREBAUGH. AND LAURA BARRERA.  
2 AFTER THESE TWO SPEAKERS. IS THERE ANYONE ELSE WHO HAS  
3 REQUESTED TO SPEAK AT THIS TIME?

4

5 **HUGH HOLLANDBERG:** GOOD MORNING -- OR GOOD AFTERNOON.

6

7 **SUP. BURKE, CHAIR:** WE'LL GO BACK DOWN AND GET THERE -- WE'LL  
8 GO DOWN AND GET YOUR NAMES.

9

10 **HUGH HOLLANDBERG:** YES, HUGH HOLLANDBERG. I HAVE HAD THE  
11 GLORIOUS OPPORTUNITY OF KNOWING EACH OF YOU SUPERVISORS  
12 INDIVIDUALLY FOR A LONG PERIOD OF TIME. I'VE BEEN PROUD TO  
13 KNOW YOU. I'M SOMEWHAT LESS PROUD TO KNOW YOU TODAY. I THINK  
14 THAT THE CLOSING OF RANCHO IS SHORT-SIGHTED, TO SAY THE LEAST.  
15 YOU ARE FORCING PEOPLE WITH SIGNIFICANT PHYSICAL DISABILITIES  
16 TO A LIFE CONFINED TO A NURSING HOME, BECAUSE THEY WILL NOT BE  
17 ABLE TO GET THE CARE THAT IS COST-EFFECTIVE TO ALLOW THEM TO  
18 GET BACK IN THE COMMUNITY AND BECOME PRODUCTIVE MEMBERS OF  
19 SOCIETY. I WAS PRIVILEGED TO BE SELF-EMPLOYED FOR 40-SOME-ODD  
20 YEARS AND I PAID IN MY HARD-EARNED MONEY TO THE FEDERAL  
21 GOVERNMENT AND I OWNED PROPERTY IN THE COUNTY OF LOS ANGELES,  
22 I PAID MY PROPERTY TAXES. AND IT WAS -- AND TO CLOSE RANCHO  
23 DIMS THE LIGHT OF HOPE THAT PEOPLE WITH SIGNIFICANT  
24 DISABILITIES HAVE OF BEING -- COME ON, WILL YOU LOOK AT ME,  
25 FOR CHRIST'S SAKE? [ Applause ].



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1

**HUGH HOLLANDBERG:** YOU SEE ME AS AN INDIVIDUAL, YOU DON'T SEE ME AS A CHAIR, YOU DON'T SEE ME AS SOMETHING THAT YOU HOPE TO GOD YOU'LL NEVER BE. YOU KNOW, YOU DON'T HAVE THE RIGHT TO CLOSE RANCHO. YOU DO NOT HAVE THE RIGHT TO CLOSE THE ONE EVIDENCE OF HOPE THAT PEOPLE WITH SIGNIFICANT DISABILITIES HAVE IN THIS COUNTY. SO, EXPLORE, HOLD OFF ON YOUR RUSH TO JUDGMENT, LET THE PEOPLE OF THE COUNTY TRY AND DEVELOP THE SOUTH SIDE OF THE CAMPUS SO THAT IT CAN BE USED TO FUND RANCHO, TO FUND HOPE BECAUSE GOD FORBID YOU MAY, DUE TO AN ACCIDENT, TO A SHOOTING OR SIMPLY BECAUSE YOU WERE BORN THREE MONTHS PREMATURE TO BE -- TO HAVE A SIGNIFICANT DISABILITY AND I HAVE COME BEFORE YOU WHEN I'VE BEEN AMBULATORY, I HAVE COME BEFORE YOU WHEN I HAVE BEEN USING A CANE, I HAVE COME BEFORE YOU WHEN I'VE USED A MANUAL WHEELCHAIR AND NOW I'M IN A POWER CHAIR. GOOD LORD WILLING, THE NEXT TIME I'LL BE IN A GURNEY BUT GODDAMN IT, I'LL BE HERE BECAUSE I'M A HUMAN BEING AND I DESERVE THE RIGHT TO LIVE THE BEST I CAN LIVE AND YOU CANNOT CLOSE RANCHO. YOU OWE IT TO THE PEOPLE OF LOS ANGELES COUNTY TO KEEP IT OPEN. THANK YOU VERY MUCH, I HAVE A LETTER I'D LIKE TO LEAVE.

22

**SUP. BURKE, CHAIR:** ALL RIGHT, THANK YOU. THERE WERE SOME PEOPLE WHO I CALLED WHO DID NOT HEAR ME WHEN I CALLED THEM AND I KNOW IT PERHAPS IT WAS BECAUSE OF THE PEOPLE WHO WERE



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1 CHEERING. AND I'D LIKE TO ASK THEM TO COME UP NOW. WILLIAM  
2 HAMPTON, MARY RIOS. AND I CALLED A COUPLE OF TIMES MARY RIOS  
3 BEFORE THE OTHER RIOS CAME UP. MARY RIOS, LUIS MATA -- ALL  
4 RIGHT, YES, WOULD YOU -- UH-HUH. PLEASE STATE YOUR NAME.

5

6 **JOE TUSIA:** MY NAME IS JOE TUSIA AND I REPRESENT A NONPROFIT  
7 ORGANIZATION CALLED BEYOND INJURY AND ALSO A MEDICAL SUPPLY  
8 COMPANY CALLED EXTREME MEDICAL. I WAS INJURED ABOUT NINE YEARS  
9 AGO, A VICTIM OF VIOLENT CRIME. I ENDED UP AT RANCHO LOS  
10 AMIGOS MEDICAL CENTER. A LOT OF THE PEOPLE HERE THAT WERE  
11 INJURED IN A TRAUMATIC SENSE THEY, YOU KNOW, THEIR PARENTS OR  
12 THEIR FRIENDS GET A PHONE CALL. YOU KNOW, YOUR SON MIGHT NOT  
13 MAKE IT THROUGH THE NIGHT. GOD HOPES YOU NEVER HAVE TO GO  
14 THROUGH SOMETHING LIKE THAT BUT WHEN YOU GET TO RANCHO LOS  
15 AMIGOS YOU ARE OBVIOUSLY DOWN. BUT RANCHO NEVER COUNTS YOU  
16 OUT. RANCHO GIVES YOU HOPE. THEY GIVE YOU YOUR LIFE BACK, IS  
17 REALLY WHAT IT AMOUNTS TO. I'M A LITTLE UNFAMILIAR WITH WHO  
18 VOTED WHICH WAY. COULD I SEE A SHOW OF HANDS ON WHO VOTED NOT  
19 TO CLOSE RANCHO. [ Applause ]

20

21 **SUP. BURKE, CHAIR:** JUST TO CLARIFY THERE ARE A NUMBER OF  
22 PROPOSALS. ONE IS FOR IT TO BECOME PRIVATE FACILITY, BUT THIS  
23 ONE'S BEFORE US RIGHT NOW.

24



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1   **JOE TUSIA:** I'D LIKE TO BE HEARD, PLEASE. ALSO I'D LIKE TO SEE  
2   A SHOW OF HANDS ON WHO VOTED TO CLOSE RANCHO, PLEASE. IF  
3   YOU'RE BEHIND YOUR DECISION I'D LIKE TO SEE A SHOW OF HANDS, I  
4   DON'T THINK IT'S TOO MUCH TO ASK.

5

6   **SUP. BURKE, CHAIR:** YEAH I THINK IT'S OUT OF ORDER, I THINK  
7   THAT THIS IS THE SECOND HEARING. WE HAVE A NUMBER OF THINGS  
8   THAT ARE BEFORE US AND WE HAVE A REPORT BEFORE US.

9

10   **JOE TUSIA:** OKAY. RESPECTFULLY. LISTEN I WOULD LIKE TO SAY  
11   THIS. IF YOU ARE EMBARRASSED TO RAISE YOUR HAND TO CLOSE  
12   RANCHO, THERE IS A PROBLEM. THERE IS A PROBLEM HERE. THERE'S A  
13   LOT OF ALTERNATIVES. MAYBE YOU MADE THE DECISION TO CLOSE  
14   RANCHO BEFORE YOU HAD ALL THE INFORMATION. I TOTALLY  
15   UNDERSTAND THAT AND I RESPECT THAT BUT NOW THAT EVERYTHING IS  
16   ON THE TABLE I THINK RANCHO DESERVES A CHANCE TO MAKE IT ON  
17   THEIR OWN. GREAT PEOPLE WORK THERE. RANCHO WILL MAKE IT WORK.  
18   I'LL GUARANTEE YOU THAT. THE PEOPLE THAT ARE INVOLVED THERE,  
19   THE MANAGEMENT, THEY CAN MAKE RANCHO A PROFITABLE FACILITY.  
20   I'D LIKEN CLOSING RANCHO TO KICKING A GUY WHEN HE'S DOWN. YOU  
21   KNOW, ALL THE PEOPLE YOU SEE HERE, YOU KNOW, PRODUCTIVE  
22   PEOPLE, THEY COME HERE, THEY SUPPORT, THEY'RE INVOLVED. AND WE  
23   ARE HERE TO SPEAK TODAY FOR THE PEOPLE THAT CAN'T BE HERE AND  
24   THE PEOPLE THAT HAVE HAD NOT YET BEEN INJURED. AND I'LL TELL  
25   YOU THIS, IF YOU HAD A FAMILY MEMBER THAT HAD A TRAUMATIC





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1 INJURY, IF YOU HAD A FAMILY MEMBER THAT WAS INJURED THAT WAS  
2 PARALYZED, YOU WOULD NOT EVEN CONSIDER CLOSING RANCHO. BECAUSE  
3 THIS IS -- [ Applause ]

4

5 **JOE TUSIA:** THIS IS A STATE-OF-THE-ART FACILITY. WHEN YOU GO TO  
6 OTHER STATES, PEOPLE ALWAYS TALK ABOUT RANCHO LOS AMIGOS  
7 MEDICAL CENTER. IT HAS A HISTORY. AND I RESPECTFULLY REQUEST  
8 THAT YOU KEEP RANCHO OPEN. THANK YOU.

9

10 **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH. [ Applause ].

11

12 **SUP. BURKE, CHAIR:** NOW, WILLIAM HAMPTON -- YOU KNOW, WHAT'S  
13 HAPPENED IS THERE ARE PEOPLE WHO HAVE PUT THEIR NAMES IN AND  
14 DURING THE APPLAUSE WE CALL THEIR NAME AND THEY HAVEN'T BEEN  
15 HEARD. WILLIAM HAMPTON, LUIS MATA, WOULD YOU PLEASE COME  
16 FORWARD, GILBERT SALINAS, JANET PACHO, AND STEVE LONG AND  
17 UMBERTO JIMINEZ, PLEASE COME UP IN THE ORDER I CALLED YOUR  
18 NAME AND IF YOU'RE NOT IN THAT LIST WE WILL ASK YOU TO COME UP  
19 AFTER THESE PEOPLE HAVE CONCLUDED SPEAKING. ALL RIGHT, WILLIAM  
20 HAMPTON. I THOUGHT HE HAD SPOKEN. ALL RIGHT, LUIS MATA, DID  
21 YOU SPEAK? [ Inaudible ].

22

23 **SUP. BURKE, CHAIR:** DID YOU ALREADY SPEAK? GILBERT SALINAS, DID  
24 YOU ALREADY SPEAK? JANET PECO, DID YOU SPEAK? UMBERTO JIMINEZ?  
25 STEVE LONG? ALL RIGHT, STEVE LONG, WOULD YOU PLEASE COME UP?



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1 AND WOULD ALL THE PEOPLE WHOSE NAMES I DID NOT CALL BUT WHO  
2 WISH TO SPEAK GIVE THEIR NAMES TO THE OFFICER THERE AND -- AS  
3 YOU COME UP. WELL THE DOCTORS ARE GOING TO HAVE TO -- LET ME  
4 EXPLAIN. THE DOCTORS ARE GOING TO HAVE TO SPEAK ALONG WITH  
5 THIS PACK OF PEOPLE. AND I DON'T WANT TO INSULT YOU, CALLING  
6 YOU PACK OF PEOPLE. I'M SORRY. [ Laughter ].

7

8 **SUP. BURKE, CHAIR:** THIS ISN'T WHAT WE CALL NEXT -- ALL RIGHT,  
9 STEVE LONG IS COMING UP. ARE THERE -- YOU HAVE -- WHY DON'T  
10 YOU GO DOWN THERE AND GET SOME OF THESE SHEETS AND HAVE THE  
11 PEOPLE WHO DID NOT SPEAK WHO ARE WHEELCHAIR USERS, WHO WANT TO  
12 SPEAK, TO GET THEIR NAMES. BECAUSE I DON'T KNOW WHAT'S  
13 HAPPENING RIGHT NOW. AND WE CAN ASK THE PEOPLE WHO WISH TO  
14 SPEAK WHOSE NAMES HAVE NOT BEEN CALLED TO COME UP HERE, WHO  
15 ARE WHEELCHAIR USERS, PLEASE COME ON UP. WELL, WE CAN TAKE THE  
16 FIRST TWO PEOPLE UP HERE. WOULD YOU PLEASE STATE YOUR NAME,  
17 SIR.

18

19 **STEVE LONG:** MY NAME IS STEVE LONG.

20

21 **SUP. BURKE, CHAIR:** THANK YOU.

22

23 **STEVE LONG:** CONTINUE? OKAY THANK YOU FOR THE OPPORTUNITY --

24



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1    **SUP. BURKE, CHAIR:** I'M GOING TO ASK EVERYONE TO PLEASE GIVE  
2    HIM YOUR ATTENTION, TO BE QUIET SO HE CAN BE HEARD. THANK YOU.

3

4    **STEVE LONG:** I'D JUST LIKE SOME OF THE OTHER PEOPLE HERE, A  
5    LONG-TIME RANCHO PATIENT, I WAS A PATIENT IN '63 AND 40 YEARS,  
6    STILL AN OUTPATIENT. I HAVE FOUND THERE JUST ARE NO PRIVATE  
7    PHYSICIANS IN THE COMMUNITY THAT KNOW ANYTHING ABOUT SPINAL  
8    CORD INJURY. I FINALLY FOUND ONE AND IT'S MORE I THAN SHE  
9    THAT'S DICTATING MY CARE. UNFORTUNATELY IF I HAVE ANY  
10   SIGNIFICANT ISSUES AND I NEED TO GO BACK AS AN OUTPATIENT  
11   THAT'S WHERE THE EXPERTISE IS AND I REALLY DON'T THINK THERE  
12   ARE ANYBODY IN THE COMMUNITY THAT HAS THAT INFORMATION OR  
13   KNOWLEDGE. JUST PERSONALLY AS A LONG-TERM PERSON AND AGING  
14   WITH A DISABILITY, I'M NOT SURE WHAT THE ANSWER'S GOING TO BE  
15   IN THE FUTURE WITHOUT RANCHO. I'D LIKE TO JUST REFERENCE THE  
16   AUDIT THAT THE BOARD COMMISSIONED, THE BLUE CONSULTING  
17   COMMISSION. AND I'D JUST REFERENCE THAT THE BOARD WAS ALSO  
18   INFORMED THAT AN ALTERNATIVE GOVERNANCE STRUCTURE BY RANCHO  
19   LOS AMIGOS COULD SAVE THE COUNTY APPROXIMATELY \$64 MILLION FOR  
20   FISCAL YEAR 2004 AND \$70 MILLION FOR 2005 AND 2006. D.H.S.,  
21   THE DEPARTMENT OF HEALTH SERVICES BELIEVES THAT SIMILAR  
22   SAVINGS ARE POSSIBLE AFTER CLOSING RANCHO -- SOMEHOW I DON'T  
23   GET THAT. IF WE CAN SAVE MONEY THROUGH ALTERNATIVE GOVERNANCE  
24   WHY DO WE HAVE TO GO TO THE POINT WHERE WE HAVE TO CLOSE  
25   RANCHO? IT DOESN'T SEEM TO MAKE MUCH SENSE TO ME. THE OTHER



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1    ISSUE IS THAT -- I'M QUOTING. IT'S ON PAGE THREE. D.H.S. AND  
2    RANCHO, AND ITS ABILITY TO MAKE SIGNIFICANT CHANGES AS AN  
3    ALTERNATIVE GOVERNANCE OR NONPROFIT IN THEIR OPERATIONS OVER A  
4    RELATIVELY SHORT PERIOD OF TIME MAY OR MAY NOT BE ACHIEVABLE  
5    POSES A POTENTIALLY SUBSTANTIAL RISK TO THE COUNTY. AND I'M  
6    NOT SURE HOW IT COULD BE MORE OF A RISK UNTIL ALL OF THE  
7    PEOPLE HAVE TESTIFIED HERE. SO THAT JUST DOESN'T MAKE SENSE  
8    EITHER. AND IT GOES ON TO THESE REPORTS THAT THERE AREN'T THE  
9    SERVICES IN THE COMMUNITY, THERE AREN'T THE STAFF IN THE  
10    COMMUNITY, THERE ISN'T THE EXPERTISE IN THE COMMUNITY. SO I  
11    CERTAINLY SUPPORT THE MOTION TO KEEP THIS OPEN. GIVE RANCHO A  
12    CHANCE TO SUCCEED, GIVE IT A CHANCE TO -- I THINK WE WERE  
13    GIVEN THE FALSE HOPE WHEN RANCHO WAS NOT CLOSED OR CONVERTED  
14    IN THE PAST. WE HAVE A CHANCE. LET'S MAKE THIS HAPPEN, THANK  
15    YOU.

16

17    **SUP. BURKE, CHAIR:** ALL RIGHT, THANK YOU. JEFFREY KLEASE AND  
18    MANUEL ANDROTTI, PLEASE COME FORWARD. SIR, JUST COME FORWARD.

19

20    **DR. ANDREW SACKS:** THANK YOU FOR HEARING ME TODAY. MY NAME IS  
21    DR. ANDREW SACKS AND I HAD A SPINAL INJURY 18 YEARS AGO AND  
22    WITHOUT INTENSE REHAB BOTH -- CLOSE TO SIX MONTH IN-PATIENT  
23    AND CLOSE TO A YEAR OUT-PATIENT AT LEAST AFTERWARDS THERE IS  
24    NO WAY I'D BE UP HERE TODAY SAYING DR. BEFORE MY NAME. AND I  
25    REALLY WOULD LIKE TO EMPHASIZE HOW IMPORTANT REHAB IS AFTER A



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1 TRAUMATIC INJURY. AS I STATED, I'M A PSYCHOLOGIST AND I WORK  
2 AT RANCHO IN DEALING WITH ALL THE INDIVIDUALS. AND IT'S SO  
3 TRAUMATIC THAT TO -- TO FATHOM THE FACT THAT IF RANCHO WASN'T  
4 HERE, INDIVIDUALS WOULD BE IN AN ACUTE-CARE HOSPITAL FOR A  
5 COUPLE OF WEEKS OR MAYBE A MONTH AND THEY WOULD END UP JUST IN  
6 NURSING HOMES WITH NO LIVES AND NO KNOW-HOW TO TAKE CARE OF  
7 THEMSELVES. IT'S UNIMAGINABLE. AND ALSO ONE OF THE -- ONE OF  
8 THE MAIN SERVICES THAT'S ALSO PROVIDED AT RANCHO, ONE OF THE  
9 SIDE EFFECTS I GUESS, FOR LACK OF A BETTER TERM AT THIS TIME,  
10 OF DISABILITY IS PRESSURE SORES, WOUNDS, AND RANCHO HAS A  
11 STATE-OF-THE-ART WOUND CARE UNIT. THE SURGEON THERE PROVIDES  
12 SURGERIES TO FIX PRESSURE ULCERS. THAT IT'S A SERVICE THAT'S  
13 NOT DUPLICABLE, ESPECIALLY HERE IN SOUTHERN CALIFORNIA. SO  
14 JUST LIKE EVERYONE ELSE HAS STATED BEFORE, PLEASE CONSIDER ALL  
15 OF THIS AND HOPEFULLY YOU'LL BE ABLE TO CHANGE YOUR MIND AND  
16 KEEP RANCHO OPEN. THANK YOU.

17

18 **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH. YES, SIR, WOULD YOU  
19 PLEASE STATE YOUR NAME.

20

21 **ANGEL WATERS, JR.:** GOOD AFTERNOON, MY NAME'S ANGEL WATERS, JR.  
22 I'M HERE REPRESENTING PEOPLE FROM RANCHO. I LEFT WORK TODAY TO  
23 COME HERE BECAUSE THIS IS VERY IMPORTANT TO ME AND TO MANY  
24 PEOPLE HERE. I WAS A GUNSHOT WOUND VICTIM, I GOT SHOT IN MY  
25 HEAD, IN THE BRAIN. I DON'T KNOW IF ANY OF YOU HAVE BEEN SHOT



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1 IN THE BRAIN BUT IT IS REAL HARD AND TO SURVIVE AND THEY GAVE  
2 YOU NO HOPE. THEY SAID I WAS GOING TO BE A MUTE, GOING TO BE A  
3 VEGETABLE, WOULDN'T BE ABLE TO TALK, WALK OR ANYTHING AND HERE  
4 I AM NOW. I GOT REHABILITATION AT RANCHO LOS AMIGOS, IT'S A  
5 VERY GOOD HOSPITAL, MANY PEOPLE USE IT AND I'M HERE, YOU KNOW,  
6 TO REPRESENT IT AND ASK YOU PLEASE NOT TO CLOSE RANCHO 'CAUSE  
7 IT HELPS A LOT OF PEOPLE AND THAT'S WHY ALL THESE PEOPLE ARE  
8 HERE IN THE BACK OF ME, 'CAUSE THEY HELPED THEM OUT, TOO AND  
9 WE NEED THIS HOSPITAL FOR EVERYBODY BECAUSE IT REHABILITATES A  
10 LOT OF PEOPLE SO THEY CAN MOVE ON AND BE SUCCESSFUL IN LIFE  
11 AND NOT JUST BE DEPRESSED AT HOME AND KILL THEMSELVES 'CAUSE  
12 THEY'RE IN A WHEELCHAIR. SO I ASK YOU NOT TO CLOSE RANCHO AND  
13 I QUOTE, THAT THAT STATEMENT YOU GOT ON THE WALLET THERE, THE  
14 GOVERNMENT OF THE PEOPLE, BY THE PEOPLE, FOR THE PEOPLE, WE  
15 ARE THE PEOPLE AND WE NEED THIS HOSPITAL AND YOU ARE THE  
16 GOVERNMENT AND WHY -- IF YOU ARE AGAINST US, YOU KNOW, YOU'RE  
17 CLOSING DOWN THE HOSPITAL SO WHY IF YOU ARE FOR US, HOW CAN  
18 YOU BE AGAINST US. SO I ASK YOU NOT TO CLOSE DOWN THIS  
19 HOSPITAL, RANCHO LOS AMIGOS CENTER BECAUSE IT HELPS A LOT OF  
20 PEOPLE, A LOT OF DIFFERENT RACES AND DIFFERENT DISABILITIES.  
21 SO I ASK YOU PLEASE NOT TO CLOSE THIS HOSPITAL AND KEEP IT IN  
22 MIND THAT WE ALL NEED THIS AND IT'S BETTER FOR EVERYBODY IN  
23 THE COMMUNITY, IN CALIFORNIA, ALL OVER THE WORLD. IT'S A  
24 NATIONAL REHABILITATION CENTER. SO IF YOU CLOSE THIS HOSPITAL,  
25 I WILL NOT BE ABLE TO HAVE THE CHANCE TO WALK EVER AGAIN AND



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1 MANY PEOPLE THAT HAVE DIFFERENT NEEDS AND THEY WILL DIE AND  
2 THEY WILL HAVE DIFFERENT THINGS THAT WILL AFFECT THEM AND  
3 THEIR FAMILIES. SO, YOU KNOW, I ASK YOU PLEASE NOT TO CONSIDER  
4 IT IN YOUR HEART AND HAVE COMPASSION AND IF GOD IS WITH US,  
5 WHO CAN BE AGAINST US, THANK YOU. [ Applause ].

6

7 **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH. MAY I JUST -- YES,  
8 SIR. COME RIGHT UP HERE. MAY I CLARIFY. WHAT I'M GOING TO DO  
9 IS CALL THE DOCTORS AFTER ALL WHEELCHAIR USERS HAVE SPOKEN. IF  
10 IT'S A DOCTOR WHO IS A WHEELCHAIR USER WE WILL CALL YOU IN  
11 PRIORITY. AFTER THE CONCLUSION OF THAT WE WILL CALL THE  
12 DOCTORS, WE WILL ALSO CALL THE REPRESENTATIVE AND STATE  
13 LEGISLATORS. YES SIR.

14

15 **JEFFREY CRESSEY:** THANK YOU, MY NAME IS JEFFREY CRESSEY. FOR  
16 THE LAST 23 YEARS I'VE BEEN EMPLOYED BY THE FEDERALLY FUNDED  
17 SPINAL CORD INJURY PROJECT LOCATED AT RANCHO. AND I'M NOT HERE  
18 TO INSULT YOUR INTELLIGENCE BY DISCUSSING THE OBVIOUS AND  
19 NUMEROUS MORAL ISSUES INVOLVED HERE. I WANT TO FOCUS ON ONE  
20 LINE FROM DR. GARTHWAITE'S LETTER OF JANUARY 28th. THE LINE,  
21 AND I'M QUOTING, "PROVIDE OR PURCHASE MANDATED SERVICES AND  
22 OTHER FACILITIES FOR THE COUNTY'S MANDATED POPULATION", WHICH  
23 WE ALL KNOW MEANS THE POOR. THIS OF COURSE IS RELATED TO  
24 SECTION 17000 OF THE WELFARE AND INSTITUTION CODE WHICH  
25 MANDATES AS YOU KNOW RELIEF AND SUPPORT FOR THOSE





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1 INCAPACITATED BY ACCIDENTS. WHO HAS THE EXPERTISE TO PROVIDE  
2 PROPER RELIEF AND SUPPORT FOR THE TYPES OF SEVERE DISABILITIES  
3 SEEN AT RANCHO? YOU CANNOT PURCHASE RELIEF AND SUPPORT FOR  
4 THESE SEVERELY DISABLED PEOPLE. FROM THE FOLLOW-UP RESEARCH  
5 WE'VE CONDUCTED, AND AS A CONSUMER I SUGGEST THAT YOU WILL  
6 SPEND MONEY ON THE COUNTY'S MANDATED POPULATION IN THE MOST  
7 EXPENSIVE ARENA POSSIBLE, THE EMERGENCY ROOM. THE COST OF ONE  
8 SPINAL CORD INJURY, THE LIFETIME CARE COST OF ONE SPINAL CORD  
9 INJURY CAN EXCEED OVER ONE MILLION DOLLARS. THE ARGUMENT THAT  
10 CLOSURE SAVES MONEY IS A SPECIOUS ONE, WHICH WILL CARRY WITH  
11 IT TRAGIC AND UNNECESSARY RESULTS. I'M AWARE THAT THE  
12 DEPARTMENT OF HEALTH SERVICES IS HEMORRHAGING MONEY. RANCHO IS  
13 THE CROWN JEWEL OF D.H.S. USE IT PROPERLY AND LET IT BECOME  
14 PART OF THE SOLUTION, NOT THE PROBLEM. RANCHO CAN WORK. PLEASE  
15 DON'T CLOSE THE DOOR ON THOSE WHO ARE UNABLE TO OPEN IT. THANK  
16 YOU.

17

18 **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH. WOULD YOU STATE YOUR  
19 NAME, PLEASE.

20

21 **DEBBIE TANAKA:** MY NAME IS DEBBIE HALLS TANAKA AND I FEEL  
22 COMPELLED TODAY TO COME AND SPEAK ON BEHALF OF RANCHO LOS  
23 AMIGOS. WHEN I HAD MY ACCIDENT BACK IN 1966 I WAS ONLY 16  
24 YEARS OLD AND AT THAT TIME, A LITTLE WAS GOING ON IN TERMS OF  
25 REHABILITATION. THERE WERE NO CURB CUTS, THERE WERE NO



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1 ACCESSIBLE REST ROOMS AND ARCHITECTURAL BARRIERS WERE A  
2 COMMONPLACE. BUT WHAT I HAVE GOTTEN FROM RANCHO HAS BEEN THE  
3 ABILITY TO BE ABLE TO GO AND WORK AFTER FOUR YEARS OF MY  
4 ACCIDENT. I ALSO WANT TO SPEAK ON BEHALF TODAY OF THE -- ON  
5 BEHALF OF THE DEPARTMENT OF REHAB. I'M ALSO A VOCATIONAL REHAB  
6 COUNSELOR AND SUPERVISOR FOR THE STATE DEPARTMENT OF REHAB AND  
7 I WANT TO SAY THAT PEOPLE ARE NOT GOING TO BE ABLE TO GO TO  
8 WORK IF THEY DO NOT HAVE THE SKILLS AND ABILITIES AND THE  
9 TECHNIQUES IN WHICH TO LIVE THEIR LIVES INDEPENDENTLY. AND  
10 THAT DOESN'T JUST MEAN TO LIVE IT -- YOU KNOW, BEING ABLE TO  
11 DO THINGS ON YOUR OWN BUT BEING ABLE TO UTILIZE, INSTRUCTING  
12 OTHERS HOW TO HELP YOU. BEING INDEPENDENT MEANS A LOT MORE  
13 THAN JUST BEING ABLE TO TAKE CARE OF YOURSELF, IT ALSO MEANS  
14 BEING ABLE TO SUPPORT YOURSELF AND HAVE A LIVELIHOOD. I WANT  
15 TO THANK YOU FOR THIS OPPORTUNITY TO SAY THAT WITHOUT THE  
16 TRAINING THAT RANCHO PROVIDES TO SO MANY INDIVIDUALS. YOUR  
17 DISABLED COMMUNITY WILL NOT BE AS OUT THERE IN THE FOREFRONT  
18 TRYING TO MAKE A WAY FOR THEMSELVES AND TO LIVE INDEPENDENTLY  
19 AND BE ABLE TO WORK, THANK YOU.

20

21 **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH. AND YOUR NAME, SIR?  
22 YOU KNOW, SOMEHOW I DON'T THINK ANYONE UNDERSTOOD. WE CANNOT  
23 HAVE CLAPPING. AND I KNOW EVERYONE, WE REALLY AGREE WITH THE  
24 THINGS THAT PEOPLE ARE SAYING, BUT WE'RE GOING TO ASK YOU JUST



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1 TO NOT CLAP AFTER EACH PERSON SO THAT WE CAN GET -- MOVE THIS  
2 AND EVERYONE CAN BE HEARD.

3

4 **TYLER HUNT:** MY NAME IS TYLER HUNT AND I HAVE BEEN GOING TO  
5 RANCHO SINCE I WAS SEVEN YEARS OLD. ONE OF THE MOST IMPORTANT  
6 THINGS TO ME IS A WHEELCHAIR SPORTS PROGRAM. THIS SPORTS  
7 PROGRAM HAS CHANGED MY LIFE IN SO MANY WAYS. IT MEANS THE  
8 WORLD TO ME. EACH DAY I LOOK FORWARD TO THE OPPORTUNITY TO BE  
9 A REGULAR KID, AND TO BE ACCEPTED FOR WHO I AM. AT RANCHO I  
10 HAVE SO MUCH FUN AND I LEARN SO MANY THINGS THAT I COULD NEVER  
11 LEARN ANYWHERE ELSE. MOST IMPORTANTLY I HAVE LEARNED THAT I AM  
12 CAPABLE OF ANYTHING. I CAN DO ANYTHING I SET MY MIND TO. I  
13 PLAN TO GO TO COLLEGE AND LIVE A LIFE LIKE EVERYONE ELSE.  
14 WITHOUT RANCHO I KNOW IT WOULD BE HARDER AND PROBABLY SHORTER.  
15 WHAT A SCARY THOUGHT, I BEG YOU FROM THE BOTTOM OF MY HEART TO  
16 KEEP RANCHO OPEN. THANK YOU.

17

18 **SUP. BURKE, CHAIR:** COULD WE HAVE YOUR NAME AGAIN?

19

20 **TYLER HUNT:** TYLER HUNT.

21

22 **SUP. BURKE, CHAIR:** TYLER HUNT. THANK YOU. YES, AND PLEASE  
23 STATE YOUR NAME, SIR.

24

25 **MANUEL ANDRADE:** MY NAME IS MANUEL ANDRADE.



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1

2 **SUP. BURKE, CHAIR:** MANUEL ANDRADE, YES.

3

4 **MANUEL ANDRADE:** I'VE BEEN AN OUTPATIENT AT RANCHO LOS AMIGOS  
5 SINCE I GOT HURT IN 1991. RANCHO LOS AMIGO HAS ALL THE CARE  
6 THAT I NEED AS WELL AS FOR OTHER INDIVIDUALS WITH  
7 DISABILITIES. IF YOU CLOSE RANCHO, WE WOULD NOT HAVE A PLACE  
8 TO GO, AND AS TYLER HUNT MENTIONED, RANCHO LOS AMIGO NATIONAL  
9 REHABILITATION CENTER ALSO PROVIDES A WHEELCHAIR SPORTS  
10 PROGRAM WHERE, FOR EVERY INDIVIDUAL WHO WOULD LIKE TO TRY  
11 PLAYING WHEELCHAIR BASKETBALL, TENNIS, HOCKEY, FOOTBALL,  
12 BASKETBALL, PLEASE DON'T CLOSE RANCHO. OTHERWISE MYSELF, AS  
13 WELL AS OTHER INDIVIDUALS WITH THIS DISABILITY, WILL NOT HAVE  
14 A PLACE TO GO TO. THANK YOU.

15

16 **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH. AND YOUR NAME PLEASE?

17

18 **FRANCES OZER:** MY NAME IS FRANCES OZER. I LIVE IN PASADENA. AND  
19 I STAND BEFORE YOU TODAY FOR TWO REASONS. THE FIRST IS TO GIVE  
20 MY VOICE TO THE GRAVE CONCERNS OVER YOUR DECISION TO CLOSE  
21 RANCHO LOS AMIGOS, AND THE SECOND REASON IS SIMPLY BECAUSE I  
22 CAN. I AM NO LONGER AFFILIATED WITH THE CENTER. RATHER, I AM A  
23 RANCHO GRADUATE WHO OWES HER CURRENT LIFE TO THOSE DEDICATED  
24 STAFF MEMBERS WHO TAUGHT AND ASSISTED ME. 14 MONTHS AGO, I WAS  
25 RUSHED TO THE HOSPITAL WITH SEVERE BACK PAIN. UNFORTUNATELY, I



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1 HAD ALLOWED MY HEALTH INSURANCE TO LAPSE. THE FIRST HOSPITAL  
2 WHERE I WAS TAKEN, GOOD SAMARITAN, REFUSED TO TREAT ME AND  
3 DUMPED ME AT U.S.C. L.A. COUNTY HOSPITAL IN THE MIDDLE OF THE  
4 NIGHT. GO AHEAD AND TELL ME THIS DOESN'T HAPPEN. I KNOW  
5 DIFFERENTLY. THE DOCTORS AT L.A. COUNTY PERFORMED EMERGENCY  
6 SURGERY ON MY BACK, AND WHEN I WOKE UP SEVERAL HOURS LATER, I  
7 WAS PARALYZED FROM THE HIPS DOWN. THROUGH ALL OF THIS, I STILL  
8 CONSIDER MYSELF TO BE ONE OF THE LUCKY ONES. A WEEK AFTER MY  
9 SURGERY, A BED BECAME AVAILABLE AT RANCHO. I SPENT NINE AND A  
10 HALF WEEKS WORKING WITH A TEAM OF AMAZING DOCTORS, THERAPISTS,  
11 AND SPECIALISTS WHO TREATED NOT ONLY JUST MY INJURY, BUT MY  
12 ENTIRE PERSON. IT WASN'T RANCHO THAT I LEARNED HOW TO DRESS,  
13 FEED, AND CARE FOR MYSELF. I WAS TAUGHT THE NECESSARY TOOLS  
14 FOR ADAPTING TO MY NEW LIFE WITHIN A BODY THAT, AFTER 44  
15 YEARS, NO LONGER RESPONDS AS IT USED TO. UNDERSTAND THAT MY  
16 CASE IS NOT UNIQUE. I AM ONLY ONE OF THE MANY SUCCESS STORIES  
17 BEGUN AT RANCHO. I'VE HEARD SO MANY TIMES THAT THIS DECISION  
18 TO CLOSE RANCHO HAS NOTHING TO DO WITH THE WORLD-CLASS  
19 FACILITIES AND THE STAFF. RATHER, EVERYTHING TO DO WITH THE  
20 BOTTOM LINE, WITH MONEY. WELL, THE BOTTOM LINE IS THIS:  
21 WITHOUT THE TRAINING I RECEIVED AT RANCHO, I WOULDN'T BE WHERE  
22 I AM TODAY: EMPLOYED FULL TIME AND COMPLETELY OFF STATE  
23 SUPPORT. THIS QUALIFIES ME AS A RANCHO SUCCESS, BEING ABLE TO  
24 RECLAIM MY DIGNITY, MY LIFE, TO BE ABLE TO PAY TAXES. IF  
25 RANCHO HADN'T BEEN THERE, I WOULD'VE BEEN SENT TO A NURSING



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1 HOME, I WOULD'VE SPENT THE REST OF MY LIFE ON STATE SUPPORT.  
2 SO WEIGH IT AGAINST A LIFETIME OF BEING COMPLETELY DEPENDENT,  
3 THE FEW MONTHS THAT I NEEDED ASSISTANCE WERE WELL WORTH THE  
4 STATE'S INVESTMENT, AND THAT'S THE BOTTOM LINE. THANK YOU. [  
5 Applause ].

6

7 **SUP. BURKE, CHAIR:** YOUR NAME, SIR?

8

9 **JUAN GIARILOAY:** I JUST WANT TO THANK YOU GUYS FOR GIVING ME  
10 THE TIME TO SPEAK. MY NAME IS JUAN GIARILOAY.

11

12 **SUP. BURKE, CHAIR:** PLEASE STATE IT ONE MORE TIME, I WANT TO BE  
13 SURE WE GET YOUR NAME CORRECT.

14

15 **JUAN GIARILOAY:** SURE, MY NAME IS JUAN GIARILOAY AND I WAS A  
16 VICTIM OF A DRIVE-BY SHOOTING IN 1993 THAT LEFT ME PARALYZED  
17 FROM THE WAIST DOWN. IT WAS THROUGH RANCHO THAT I WAS ABLE TO  
18 GET MY LIFE BACK TOGETHER. THEY WERE THE ONES THAT INTRODUCED  
19 ME TO SPORTS, EDUCATION, AND TO FINALLY GETTING A JOB. WITHOUT  
20 THAT GUIDANCE AND HELP FROM THEM, I WOULD'VE BEEN ON THE  
21 STREETS LIVING ON S.S.I., WHICH I KNOW THAT IS SOMETHING THAT  
22 YOU GUYS DON'T WANT, FROM WHAT YOUR PEOPLE. RANCHO HAS GIVEN  
23 ME A LOT OF DREAMS, THEY GAVE ME DREAMS TO PURSUE MY EDUCATION  
24 TO BECOME A COUNSELOR FOR PEOPLE LIKE MYSELF IN WHEELCHAIRS.  
25 IT IS THROUGH RANCHO THAT I FOUND THE DESIRE TO DO BETTER AND



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1 NEVER TO RETURN TO A LIFE OF CRIME. PLEASE FIND A SOLUTION  
2 WITHOUT CLOSING RANCHO. I KNOW THAT YOU ARE TRYING TO DO YOUR  
3 BEST BUT CLOSING RANCHO IS NOT A SOLUTION TO YOUR PROBLEMS. IN  
4 THE LONG RUN, PATIENTS WILL DIE IF YOU GUYS CHOOSE TO CLOSE  
5 RANCHO. PLEASE THINK ABOUT THAT. THANK YOU.

6

7 **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH. AND YOUR NAME, SIR?

8

9 **VITH ING:** MY NAME IS VITH ING. I GOT HURT AT THE AGE OF FIVE  
10 IN RESCUE CAMP IN THAILAND. I MOVE HERE IN '87. I REHAB AT  
11 RANCHO EVER SINCE. RANCHO HAVE REHABBED ME IN MANY WAYS. THEY  
12 HELPED ME TO DRIVE, TRANSFER FROM MY WHEELCHAIR TO A SHOWER  
13 BENCH, BED, JUMP OFF THE CURB AND BACK ON AGAIN. WITHOUT  
14 RANCHO, INDEPENDENT WOULD NOT HAVE BEEN POSSIBLE. BY CLOSING  
15 RANCHO, THE FUTURE OF PEOPLE WITH DISABILITY WILL BE MORE  
16 DEPENDENT ON OTHER, LIKE WHICH I WAS AT THE AGE OF FIVE, WHEN  
17 I WAS SIX. COUNSELOR, PLEASE DO NOT PUT VALUE ON LIFE. IT IS  
18 PRICELESS. BY SHUTTING DOWN RANCHO, YOU ARE KILLING MY  
19 COMMUNITY AND MY FINE COMMUNITY. LOOK AT THEM. THEY'RE HERE  
20 BECAUSE THEY DON'T WANT THEIR COMMUNITY TO BE KILLED.  
21 COUNSELOR YOU ARE GUARDIAN ANGEL, PLEASE MAKE THE RIGHT  
22 DECISION, WITH THE STROKE OF YOUR PEN YOU WILL KILL MANY  
23 LIVES. KEEPING RANCHO OPEN IS THE SOLUTION. THANK YOU.

24





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1   **SUP. BURKE, CHAIR:** THANK YOU, AND YOUR NAME, PLEASE STATE YOUR  
2   NAME .

3

4   **DAVID OSENA:** MY NAME IS DAVID OSENA, AND I WAS HURT IN 1998.  
5   IF IT WASN'T FOR RANCHO I PROBABLY WOULDN'T BE HERE RIGHT NOW,  
6   I WOULDN'T BE AS INDEPENDENT AS I AM AND AS ACTIVE AS I AM. I  
7   AM A STUDENT RIGHT NOW I AM WORKING ON MY HISTORY DEGREE AND I  
8   WILL HOPEFULLY BE TEACHING SOON. IF IT WASN'T FOR RANCHO I  
9   WOULDN'T BE ABLE TO GET IN AND OUT OF MY CAR, I WOULDN'T BE  
10   ABLE TO SHOWER, WOULDN'T BE ABLE TO GET IN AND OUT OF MY BED,  
11   I WOULDN'T HAVE THE WHEELCHAIR SKILLS THAT I HAVE JUST LIKE  
12   EVERYBODY ELSE. AND ALSO THROUGH THEIR SPORTS PROGRAM I HAVE  
13   ONCE AGAIN STARTED PLAYING ATHLETIC FOOTBALL, HOCKEY,  
14   BASKETBALL, AND THERE'S SO MANY SPORTS OUT THERE FOR EVERYBODY  
15   ELSE. I'M A VERY ACTIVE PERSON IN THE COMMUNITY, I HAVE ALSO  
16   STILL TRAVELED MORE NOW AND I GONE SKY-DIVING, ALL THIS IS  
17   POSSIBLE BECAUSE OF RANCHO, BECAUSE RANCHO IS HERE FOR US AND  
18   THEY TREAT US LIKE PEOPLE, WHICH WE ARE. AND IF YOU CLOSE DOWN  
19   RANCHO YOU ARE, LIKE VIT SAID, CLOSING A COMMUNITY, AND  
20   EVERYBODY'S HERE BECAUSE WE'RE NOT JUST PART OF THE COMMUNITY,  
21   BECAUSE RANCHO IS OUR FAMILY. THANK YOU.

22

23   **SUP. BURKE, CHAIR:** THANK YOU, AND YOUR NAME SIR?

24



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1   **CHARLES WHITEHEAD:** MY NAME IS CHARLES WHITEHEAD, I'M A FORMER  
2   PATIENT AT RANCHO AND CURRENT EMPLOYEE. I'VE BEEN EMPLOYED AT  
3   RANCHO FOR 8 YEARS AND I WORK FOR DR. JACQUELINE PERRY IN THE  
4   P.K.LAB, PATHO- KINESIOLOGY DEPARTMENT. AND FOR ME RANCHO IS A  
5   SPECIAL PLACE BECAUSE I'VE HAD ALMOST 16 YEARS OF ASSOCIATION  
6   WITH IT. I WILL SAY THAT ALL THE SPECIALTIES AT RANCHO WE DO  
7   HAVE DON'T COME FROM ANYWHERE ELSE AND RANCHO IS NATIONALLY  
8   KNOWN AND PRACTICALLY PRETTY MUCH IS INTERNATIONALLY KNOWN AND  
9   I WOULD SAY THAT, YOU KNOW, THE COUNTRY IS JUST NOW TRYING TO  
10   RECOVER FROM 9/11 AND, YOU KNOW, WHAT I LIKEN THIS TO IS KIND  
11   OF ADMINISTRATIVE TERRORISM 'CAUSE YOU'RE SCARING THE DEATH  
12   OUT OF A LOT OF PEOPLE AND THE BOAT TO CLOSE RANCHO WAS LIKE A  
13   BOMB OF NOWHERE SO IF YOU COULD, YOU KNOW, PRETTY MUCH LOOK AT  
14   YOUR ALL THE NUMBERS, THE FACTS ARE THERE, YOU DON'T REALLY  
15   NEED TO CLOSE RANCHO, I SAY SAVE RANCHO NOT SAVE RANCHO'S  
16   MONEY AND WE'LL BE A GOOD COMMUNITY, RANCHO COULD BE  
17   NATIONALLY KNOWN, THE RECORD CAN STAY CLEAN, IT WILL GET  
18   BETTER AND AT THE BACKS OF THE SUPERVISORS YOU GUYS WILL ALL  
19   BENEFIT TOO, THANK YOU VERY MUCH.

20

21   **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH. AND MA'AM THE LITTLE  
22   BOY RIGHT HERE YES. STATE YOUR NAME FOR US.

23

24   **STEVEN ELICKER:** MY NAME IS STEVEN ELICKER AND I AM 10 YEARS  
25   OLD. I WAS BORN WITH CEREBRAL PALSY. I COULDN'T DO THE TEAM



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1 SPORTS THAT MY FRIENDS WERE DOING LIKE BASKETBALL AND HOCKEY.  
2 THEY WOULD TALK ABOUT THEIR FRIENDS ON THE TEAM, SCORES, GOALS  
3 AND GREAT SHOTS, I FELT LEFT OUT AND LIKE I COULDN'T DO  
4 ANYTHING. I STARTED PLAYING WHEELCHAIR SPORTS AT RANCHO 3  
5 YEARS AGO AND IT WAS SO FUN, IT MAKES ME FEEL AWESOME BECAUSE  
6 I LEARNED A LOT OF SPORTS THAT I THOUGHT I COULD NEVER DO. I  
7 DON'T FEEL LONELY ANYMORE BECAUSE I HAVE FRIENDS AT RANCHO  
8 THAT LIKE WHEELCHAIR SPORTS, PLUS I LIKE TO TALK TO MY OTHER  
9 FRIENDS ABOUT SPORTS, IT FEELS GOOD TO BE TOUGH AND FAST,  
10 WHILE I DO SPORTS IT FEELS GOOD TO HAVE A COACH TEACH ME STUFF  
11 ABOUT BEING ON A TEAM AND WAYS TO WIN THE GAME. AND MY PARENTS  
12 SAY THESE ARE IMPORTANT THINGS TO KNOW IN LIFE, ALL I KNOW IS  
13 THAT I FEEL LIKE I COULD DO ANYTHING NOW BECAUSE OF RANCHO.

14

15 **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH. [ Cheers and applause  
16 ]

17

18 **SUP. BURKE, CHAIR:** WOULD YOU STATE YOUR NAME, OR YOU COME  
19 FORWARD AND YOU STATE YOUR NAME, AND THEN WE'LL CALL ON YOU  
20 NEXT, DO YOU WANT TO START RIGHT NOW? ALL RIGHT YES.

21

22 **OBED DE SILVA:** MY NAME IS OBED DE SILVA, AND FIRST OF ALL I  
23 WOULD LIKE TO SAY DID YOU SEE THAT LITTLE BOY'S FACE, DID THAT  
24 LITTLE BOY'S FACE JUST BRIGHTEN ALL YOUR FACES, DID HIS FACE  
25 MAKE ALL OF YOU SMILE, OR IF YOU CLOSE RANCHO THAT FACE IS NOT



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1 GOING TO MAKE YOU SMILE ANY MORE, TODAY'S PROBABLY THE LAST  
2 DAY YOU'LL SEE THAT LITTLE BOY'S FACE SMILE AS HE DID TODAY,  
3 BECAUSE HE STILL HAS SPORTS AND I HAVE THE PRIVILEGE OF  
4 PLAYING WITH HIM SIDE BY SIDE WITH HIM EVERY DAY PLAYING  
5 SPORTS AND SEEING THAT SMILE, BUT IF YOU CLOSE RANCHO, YOU'LL  
6 NO LONGER SEE THAT SMILE. I ALSO WANT TO SAY THAT WE ARE NOT  
7 WHEELCHAIR PEOPLE AND WE ARE NOT A PACK OF PEOPLE, WE ARE A  
8 PEOPLE, FLESH AND BLOOD, JUST LIKE YOU. WE BLEED, WE CRY, WE  
9 BREATHE, AND WE WANT TO CONTINUE BREATHING AND LIVING BECAUSE  
10 WE ARE A PEOPLE, SO PLEASE KEEP RANCHO OPEN.

11

12 **SUP. BURKE, CHAIR:** THANK YOU. [ Applause ].

13

14 **SUP. BURKE, CHAIR:** YES MA'AM, WOULD YOU STATE YOUR NAME.

15

16 **COLLEEN MOORE:** MY NAME IS COLLEEN MOORE. I'VE BEEN WORKING  
17 SINCE I WAS 13 YEARS OLD. I'M 51. IN 1997, I LOST MY JOB  
18 BECAUSE I WAS CRIPPLED WITH ARTHRITIS, AND I WILL BE FOR THE  
19 REST OF MY LIFE. BECAUSE I HAVE SPENT 10 YEARS THROUGH PRIVATE  
20 DOCTORS, THROUGH YOUR MEDICAL INSURANCES, THROUGH YOUR  
21 H.M.O.s, THROUGH COUNTY U.S.C., TRYING TO GET HELP FOR MY  
22 ARTHRITIS, AND IF IT HADN'T HAVE BEEN FOR RANCHO LOS AMIGOS, I  
23 WOULD BE SITTING IN A ROCKING CHAIR AT HOME BEING SUPPORTED BY  
24 THE COUNTY OF LOS ANGELES IN THE STATE OF CALIFORNIA FOR  
25 S.S.I., WHICH I FILED FOR IN 1999 AND GAVE IT UP WHEN I



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1    FINALLY -- THEY GAVE ME HOPE. I HAD GIVEN UP. TOTALLY GIVEN  
2    UP. SO I HAVE ONE QUESTION FOR ALL OF YOU. WHAT IN GOD'S NAME  
3    ARE YOU THINKING? I CAN'T BELIEVE YOU PEOPLE! THEY GIVE --  
4    THEY NOT ONLY TREAT THE PROBLEM, THEY TREAT YOUR DIGNITY, THEY  
5    GIVE YOU BACK YOUR DIGNITY. THEY HELP YOU. THEY CARE, AND YOU  
6    KNOW THEY CARE. WHEN SOMEONE WALKS BY AND SAYS, "HELLO, HOW  
7    ARE YOU DOING," THEY GIVE YOU SELF-WORTH. YOU HAVEN'T BEEN  
8    THERE, YOU HAVEN'T STAYED AT COUNTY OR MARTIN LUTHER KING OR  
9    EVEN A PRIVATE FACILITY THAT TURNS YOU INTO A GUINEA BIG AND  
10    ALL THEY WANT TO DO IS GIVE YOU PAIN PILLS. RANCHO DOESN'T  
11    WANT TO GIVE YOU PAIN PILLS; THEY WANT TO GIVE YOU BACK THEIR  
12    DIGNITY AND THEY MAKE YOU WANT TO GET BACK INTO SOCIETY AND  
13    WORK. YOU KNOW, AND DON'T SIT THERE, MS. BURKE, AND SMILE AT  
14    ME, BECAUSE THERE'S ONE COMMENT I HAVE FOR YOU. I THINK YOU  
15    OUGHT TO BE ASHAMED OF YOURSELF. THESE ARE NOT "THOSE  
16    WHEELCHAIR PEOPLE."

17

18    **SUP. BURKE, CHAIR:** ALL RIGHT, I TOLD YOU I'M VERY SORRY THAT I  
19    REFERRED TO THEM AS WHEELCHAIR PEOPLE. I MEANT WHEELCHAIR  
20    USERS, AND I HOPE THAT YOU ACCEPT THE APOLOGY AND WE WANT TO  
21    THANK YOU FOR YOUR STATEMENT AND WE WANT TO MOVE ON.

22

23    **COLLEEN MOORE:** REAL QUICKLY, I DID NOT COME HERE IN MY  
24    WHEELCHAIR TODAY BECAUSE I WANT TO KEEP WALKING. OKAY? AND  
25    THESE PEOPLE AREN'T HANDICAPPED; THEY'RE PHYSICALLY



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1 CHALLENGED. TRY TO REMEMBER THAT AND STOP PUTTING EVERYBODY  
2 INTO A CATEGORY. BUT YOU NEED TO KEEP RANCHO OPEN.

3

4 **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH. SIR, WILL YOU GIVE US  
5 YOUR STATEMENT AND YOUR NAME.

6

7 **JUAN NUNOZ:** HI. MY NAME IS JUAN NUNOZ. I AM A RANCHO LOS  
8 AMIGOS REHAB SERVICES CONSUMER, AND I HAVE BEEN FOR THE PAST  
9 EIGHT YEARS. I'M ALSO A MEMBER OF THE RANCHO WHEELCHAIR SPORTS  
10 PROGRAM WHICH HAS TAUGHT ME HOW TO BE A WINNER. BECAUSE OF  
11 RANCHO LOS AMIGOS, PEOPLE WITH DISABILITIES HAVE LEARNED THAT  
12 BARRIERS PREVENTING SUCCESS CAN NOW BE BROKEN. BECAUSE OF  
13 RANCHO LOS AMIGOS, I CHOSE TO MAJOR IN REHAB -- REHABILITATION  
14 SO THAT I MIGHT BE THERE FOR OTHERS AS RANCHO HAS BEEN THERE  
15 FOR ME. I KNOW THAT WITHOUT RANCHO, I DON'T KNOW WHERE I WILL  
16 BE TODAY. WHAT ABOUT TOMORROW? IF RANCHO LOS AMIGOS IS NOT  
17 THERE TO HELP OTHERS BREAK THEIR BARRIERS, WHAT ABOUT  
18 TOMORROW, IF RANCHO LOS AMIGOS IS GONE? LEAVING PEOPLE WITH  
19 DISABILITIES WHO NEED HELP WITH NO PLACE TO TURN. WHAT ABOUT  
20 TOMORROW IF RANCHO LOS AMIGOS HAS BEEN ERASED IN OUR  
21 COMMUNITY, THE LOSS IS AN ASSET THAT CANNOT BE REPLACED. WHAT  
22 ABOUT TOMORROW, PEOPLES? I ASK YOU TO THINK OF THOSE PEOPLE  
23 WHO WILL BE DENIED THE OPPORTUNITY OF SUCCESS THAT RANCHO  
24 SERVICES PROVIDE ME. WE ARE ALL HUMAN BEINGS. ALL WE WANT IS A  
25 FAIR CHANCE AT LIFE. JUST A FEW LIKE WE WANT FOR YOURSELF AND



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1 YOUR CHILDREN. THANK YOU VERY MUCH. AND PLEASE, KEEP RANCHO  
2 OPEN.

3

4 **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH. AND SIR, WOULD YOU  
5 GIVE US YOUR NAME.

6

7 **RICHARD VALDER:** GOOD AFTERNOON, MADAM CHAIR, SUPERVISORS. MANY  
8 OF YOU KNOW ME ALREADY. I'M RICHARD VALDER, EXECUTIVE DIRECTOR  
9 OF THE DALE MacINTOSH CENTER AND CURRENT CHAIRMAN OF THE STATE  
10 INDEPENDENT LIVING COUNCIL. IN 1969, I WAS BORN INTO A FAMILY  
11 THAT BELIEVED THAT BECAUSE OF A SIN THEY COMMITTED, THAT MY  
12 DISABILITY WAS AS A RESULT. I WAS IMMEDIATELY PLACED IN THE  
13 CARE OF LOS ANGELES COUNTY AND PLACED IN THE RANCH. IT WAS MY  
14 FORTUNE THAT THE RANCH EXISTED AND THERE WERE PASSIONATE  
15 NURSES WHO CLAIMED ME AS FAMILY. THE NURSES GAVE ME EXCELLENT  
16 CARE AND PROVIDED ME WITH HOPE AND OPPORTUNITY FOR MY THIRST  
17 THREE MONTHS. AT THAT POINT, I WAS PLAYED IN THE FOSTER FAMILY  
18 THAT RAISED ME. THROUGHOUT MY LIFE, THE RANCH HAS BEEN VITAL  
19 TO MY INDEPENDENCE. WHILE A BABY AND TODDLER, THEY ADDRESSED  
20 THE MEDICAL NEEDS THAT CONTINUED TO PLAGUE ME, AND WHILE  
21 GETTING THROUGH HIGH SCHOOL AND COLLEGE, THEY ASSISTED WITH  
22 DEVELOPING SEVERAL ITEMS NECESSARY FOR MY INDEPENDENCE. THE  
23 ITEMS INCLUDED MODIFIED CLOTHING, A TABLE FOR MY WHEELCHAIR TO  
24 TAKE NOTES ON WHILE IN COLLEGE AS WELL AS MOUTH STICKS TO  
25 ADDRESS SEVERAL NEEDS. WITHOUT THESE ITEMS I WOULD NOT HAVE





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1 HAD THE ABILITY TO COMPLETE COLLEGE AND BE EMPLOYED IN A  
2 SENIOR MANAGEMENT POSITION. MY POSITIONS HAVE ALLOWED ME TO BE  
3 TOTALLY INDEPENDENT, FREE FROM ANY GOVERNMENT SUBSIDIES. THE  
4 RANCH'S INVESTMENT IN ME AND MY LIFE HAS ENABLED ME TO GIVE  
5 BACK TO THE COMMUNITY. THE RANCH STANDS FOR DIGNITY, HOPE,  
6 OPPORTUNITY, AND INDEPENDENCE. I WORKED AT THE INDEPENDENT  
7 LIVING CENTER DIRECTLY ACROSS THE STREET FROM THE RANCH FOR  
8 SIX YEARS. WITHOUT THE RANCH, HUNDREDS OF THOUSANDS OF LIVES  
9 WOULD ONLY BE A NUMBER CHECKED INTO A NURSING HOME FORGOTTEN  
10 OR FOR MANY DEATH. IT IS TRUE THAT EVERYONE WITH A DISABILITY  
11 AT SOME POINT IN TIME MUST GO THROUGH A GRIEVING PROCESS AND  
12 DETERMINE IF THEY WILL ACCEPT THEIR DISABILITY. THE RANCH  
13 PROVIDES THE FAMILY TO ADDRESS THAT DIFFICULT TIME. THE RANCH  
14 PROVIDES VITAL ACUTE CARE SERVICES THAT ARE NOT DUPLICATED BY  
15 ANY ENTITY IN LOS ANGELES COUNTY OR THE STATE. WITHOUT THE  
16 SERVICES THESE INDIVIDUALS WILL REQUIRE SERVICES FROM  
17 EMERGENCY ROOMS AND HOSPITALS. I DON'T BELIEVE THEY WILL  
18 PROVIDE ADEQUATE MEDICAL CARE AND MANY LIVES WILL BE DEVALUED.  
19 NO ONE HERE TODAY IS OUT OF TUNE TO THE REALITY OF THE  
20 ENORMOUS BUDGET CUTS FACING LOS ANGELES COUNTY AND THE STATE.  
21 HOWEVER, PLEASE WEIGH THE COSTS OF CLOSING DOWN THE RANCH IN  
22 COMPARISON TO EMERGENCY ROOM, HOSPITAL, AND NURSING HOME  
23 COSTS, BUT MOST IMPORTANTLY, THE VALUE AND THE INDIVIDUAL  
24 LIVES. LOS ANGELES COUNTY NEEDS MORE SENIOR MANAGERS WITH  
25 DISABILITIES, LIKE ALL OF US HERE TODAY. WITHOUT THE RANCH, WE



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1 CANNOT ACHIEVE INDEPENDENCE AND OPPORTUNITY OUR U.S.  
2 CONSTITUTION PROMISES. PLEASE DO WHAT YOU CAN TO KEEP THE  
3 RANCH OPEN. THANK YOU. [ Applause ]

4

5 **SUP. BURKE, CHAIR:** THANK YOU.

6

7 **MICHAEL LAUGHLIN:** MY NAME IS MICHAEL LAUGHLIN, AND I HEARD THE  
8 WORD "BOTTOM LINE" A LOT. WELL, YOU'RE LOOKING AT THE BOTTOM  
9 LINE RIGHT HERE. I'M FLESH AND BLOOD. I'M THE BOTTOM LINE.  
10 AND, YOU KNOW, A PART OF A CIVILIZED SOCIETY IS TO TAKE CARE  
11 OF PEOPLE THAT ARE UNFORTUNATE ENOUGH TO WIND UP IN THE  
12 POSITION AS A LOT OF PEOPLE HERE HAVE, AND THAT'S A SOCIETY  
13 THAT IS CIVILIZED. CLOSING OF RANCHO IS THE BEGINNING OF A  
14 SOCIETY THAT IS HEADED TOWARDS NOT BEING CIVILIZED. THE MONEY  
15 IS AROUND FOR HOMELAND SECURITY, HOMELAND AGAINST TERRORISM.  
16 WELL, CLOSING RANCHO IS AN ACT OF TERRORISM. IT'S AN ACT OF  
17 TERRORISM AGAINST ME. AND I'VE BEEN TO A LOT OF HOSPITALS  
18 WHERE I ALMOST DIED. I MEAN, BECAUSE IF IT WASN'T FOR RANCHO,  
19 GETTING ME OVER TO RANCHO LOS AMIGOS, I WOULDN'T BE HERE RIGHT  
20 NOW. I JUST WOULDN'T BE HERE. THAT'S ALL THERE IS TO IT. I HAD  
21 A BLOOD CLOT. I COULD NAME A LOT OF THINGS AND I WENT TO MY  
22 LOCAL HOSPITAL BECAUSE IT WAS IN THE MIDDLE OF THE NIGHT AND  
23 THE PARAMEDIC -- AND THE DOCTORS JUST SAY, "YOU KNOW, YOU HAD  
24 ONE MINUTE AND YOU'D BE DEAD," AND IN RANCHO, THAT NEVER  
25 HAPPENED. THERE WAS A DOCTOR THAT SAVED MY LIFE THERE. I CAN'T



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1 TELL YOU, I WOULD NOT BE HERE, AND JUST THINK OF THE PEOPLE  
2 THAT DON'T HAVE RANCHO THAT ARE DEAD RIGHT NOW. THEY'RE GONE.  
3 THEY'RE NOT UP HERE TALKING BECAUSE THEY DIDN'T HAVE RANCHO.  
4 THEY'RE DEAD. SO, I MEAN, YOU'VE GOT -- YOU CAN'T CLOSE THE  
5 PLACE. IT'S A SYMBOL. IT'S A SYMBOL OF A SOCIETY THAT CARES  
6 AND IT WOULD BE THE EPITOME OF CYNICISM AND OF A SOCIETY THAT  
7 IS GOING DOWN TO CLOSE RANCHO, AND THAT'S HOW -- I JUST FEEL  
8 LIKE, YOU KNOW, THIS IS THE WAY I FEEL, AND, I DON'T KNOW, I  
9 WASN'T GOING TO COME UP HERE TO TALK BECAUSE I FEEL LIKE  
10 WHATEVER MY WORDS COME OUT OF MY MOUTH ISN'T GOING TO MATTER  
11 BECAUSE YOU'RE GOING TO CLOSE IT DOWN AND -- BUT, HEY, HOLD  
12 OUT HOPE. THERE'S ALWAYS HOPE. THANK YOU. [ Applause ]

13

14 **SUP. BURKE, CHAIR:** AND YOUR NAME, PLEASE?

15

16 **DONNA MOODY:** MY NAME IS DONNA MOODY, AND I LIVE IN LAKEWOOD,  
17 CALIFORNIA, AND I'M GOING TO START THIS OFF. I DID WRITE  
18 SOMETHING, BUT I WOULD LIKE TO SAY REAL QUICK, THANK YOU, DON  
19 KNABE. I WANT TO THANK YOU. ON FEBRUARY 11th, 1998 I SUFFERED  
20 A SPINAL CORD INJURY, AND AT THE TIME I WAS IN BETWEEN HEALTH  
21 INSURANCE AND FOUND MYSELF AT HARBOR-U.C.L.A., AND AFTER TWO  
22 WEEKS AT RANCHO LOS AMIGOS. SINCE THE DAY I ENTERED RANCHO, I  
23 KNEW THIS WASN'T JUST ANY COUNTY FACILITY. RANCHO IS SPECIAL.  
24 FROM THE UNIQUE AND THOROUGH CHECK-IN PROCESS TO ENSURE MY  
25 HEALTH WAS STABLE, TO THE TEAM OF PHYSICIANS, THERAPISTS,



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1    TECHNICIANS, NURSES, AND AIDS THAT I SAW ON THOSE FIRST FEW  
2    HOURS AND DAYS, THE DIFFERENCE WAS OBVIOUS. THESE  
3    PROFESSIONALS KNEW WHAT THEY WERE DOING AND, MORE IMPORTANTLY,  
4    THEY KNEW AND UNDERSTOOD THE FEAR AND ANXIETY THAT I WAS GOING  
5    THROUGH AND ADDRESSED IT. I CAME INTO RANCHO WITHOUT THE  
6    ABILITY TO MOVE MY LEGS FROM BELOW MY KNEES AT ALL, AND I  
7    SPENT FIVE MONTHS THERE REGAINING SOME MOVEMENT AND STRENGTH  
8    IN MY LEGS. WHEN I LEFT RANCHO IN JUNE 1998, I LEFT WITH A  
9    WHEELCHAIR, BUT I ALSO LEFT WITH MY WALKER AND THE ABILITY TO  
10    USE IT. TODAY, I AM PROUD TO SAY THAT BECAUSE OF THE WORK THAT  
11    MY THERAPIST DID WITH ME AT RANCHO, I HAVE THE ABILITY TO WALK  
12    WITH A WALKER, BUT MORE IMPORTANTLY, THIS YEAR, I HAVE LEARNED  
13    TO ALSO WALK WITHOUT A WALKER. WHILE LYING IN BED ALL THOSE  
14    MONTHS, I NEVER DREAMED THAT I WOULD BE ABLE TO DO THAT AGAIN,  
15    AND YET HERE I AM, AND I CREDIT THE PROFESSIONALS AT RANCHO  
16    WITH THE ABILITY TO HELP ME TO DO THAT. I KNOW THAT IF I HAD  
17    BEEN SENT TO ANOTHER FACILITY, I WOULD HAVE GOTTEN DECENT  
18    CARE, HOWEVER, HAVING BEEN SENT TO RANCHO, WITH THEIR HISTORY  
19    OF RESEARCH, TREATMENT, REHABILITATION AND HANDS-ON PRACTICE  
20    FOR SPINAL CORD INJURY PATIENTS, I RECEIVED THE BEST TREATMENT  
21    AVAILABLE. I AM NOW WORKING FULL TIME FOR A MAJOR INSURANCE  
22    CORPORATION. I DRIVE AND I LIVE LIFE PRETTY MUCH AS I ALWAYS  
23    DID. THE STAFF AT RANCHO HELPED ME ACHIEVE THOSE GOALS, AND  
24    FOR THAT I AM FOREVER GRATEFUL. I WONDER NOW IF RANCHO CLOSES,  
25    WHERE WILL FUTURE, EXCUSE ME, S.C.I. PATIENTS GO TO RECEIVE



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1 THAT SAME CALIBER OF CARE, WHERE WILL THOSE 70,000 PATIENTS  
2 THAT CURRENTLY SEEK HEALTH SERVICES AT RANCHO ANNUALLY GO WHEN  
3 THEY NEED HELP. WOULD A PRIVATE HOSPITAL GIVE THEM THAT CARE?  
4 NOT IF THEY DON'T HAVE THE MEANS TO PAY FOR IT THEMSELVES OR  
5 THE MEDICAL COVERAGE THAT ELUDES SO MANY OF US THESE DAYS. GOD  
6 FORBID A LOVED ONE OF MINE EVER NEEDS RANCHO LOS AMIGOS, BUT I  
7 WOULD THANK GOD THAT THERE IS A RANCHO LOS AMIGOS IN THE CASE  
8 THAT THEY EVER DID NEED IT. THANK YOU.

9

10 **SUP. BURKE, CHAIR:** SIR, WOULD YOU GIVE YOUR AND STATE YOUR  
11 NAME?

12

13 **LOUIS HOROWITZ:** LOUIS J. HOROWITZ.

14

15 **SUP. BURKE, CHAIR:** COULD YOU -- WOULD YOU PUT THE MICROPHONE  
16 OVER.

17

18 **LEWIS HOROWITZ:** LEWIS J. HOROWITZ.

19

20 **SUP. BURKE, CHAIR:** THANK YOU.

21

22 **LOUIS HOROWITZ:** HONORABLE BOARD OF SUPERVISORS, MY NAME IS  
23 LOUIS J. HOROWITZ, I GRADUATED FROM THE UNIVERSITY OF ARKANSAS  
24 HIGH SCHOOL IN 1983. I'M PROUD AT THE PASS THEY BOUGHT THE  
25 FIRST TIME. UNFORTUNATELY IN 1987 AS A RESULT OF AN AUTO



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1 ACCIDENT I WAS SEVERELY INJURED. I WAS IN A REST HOME FOR A  
2 YEAR, UNABLE TO WALK, TALK, OR TO GET DRESSED. THE DOCTORS HAD  
3 ANALYZED ME AND I WAS A LOST CAUSE AND THEY PRESCRIBED ME  
4 PHENOL BARBITOL. AFTER A YEAR LONG BEACH MEMORIAL HOSPITAL  
5 SENT ME TO RANCHOS LOS AMIGOS. AT RANCHO LOS AMIGOS, THEY  
6 FOLLOWED MY THERAPY, ALL MY PHYSICAL THERAPY. THE DOCTORS HAD  
7 PREVIOUSLY ANALYZED ME AS BEING HOPELESS, AS BEING A LOST  
8 CAUSE, AND THEY PRESCRIBED ME PHENOL BARBITOL. AFTER A YEAR  
9 THE DOCTORS AT LONG BEACH MEMORIAL SENT ME TO RANCHO FOR ALL  
10 MY THERAPY, FOR ALL MY THERAPY. AFTER -- AFTER THAT -- AFTER  
11 ABOUT THREE MONTHS, I MOVED INTO A MOBILE HOME AND TAKE CARE  
12 OF MYSELF NOW. AS FAR AS MY PROFESSION IS CONCERNED, I'M DOING  
13 VOLUNTEERING IN A LAW FIRM IN THE FIELD OF LAW AND WILL  
14 HOPEFULLY BE INTERVIEWING FOR A JOB IN THE NEAR FUTURE FOR A  
15 PERMANENT JOB. MYSELF AND ALL OF THE EMPLOYEES AT RANCHO LOS  
16 AMIGOS, RESPECTFULLY REQUEST APPROPRIATIONS TO KEEP RANCHO LOS  
17 AMIGOS OPEN. THANK YOU.

18

19 **SUP. BURKE, CHAIR:** AND YOUR NAME, SIR?

20

21 **ADOLF ASAGAVA:** [ Speaking Spanish ]

22

23 **SUP. BURKE, CHAIR:** COULD WE HAVE AN INTERPRETER?

24



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1   **SPEAKER:** (Voice of Interpreter) I'M A RANCHO LOS AMIGOS  
2   PATIENT. FOR 16 YEARS NOW, AFTER I SUFFERED IN A CAR ACCIDENT  
3   THAT BROKE MY NECK IN THREE PLACES. AND I WAS COMPLETELY  
4   IMMOBILIZED. NOTHING ON THE BODY MOVED. I ARRIVED AT RANCHO  
5   LOS AMIGOS HOSPITAL AND BEGAN A REHABILITATION PROGRAM,  
6   EXTENSIVE, VERY STRONG AND VERY DISCIPLINED. AND LITTLE BY  
7   LITTLE, I MOVED MY MUSCLES, MY EXTREMITIES, AND AFTER A LITTLE  
8   WHILE, A FEW MONTHS, I STARTED TO BE AMBULATORY, I'D LIKE TO  
9   CHANGE MY CLOTHES, SHOWER, AND OTHER PERSONAL THINGS ON MY  
10  OWN. BECAUSE OF THE EXCELLENT WORK THAT THE STAFF AT RANCHO  
11  LOS AMIGOS DID FOR ME, TODAY, TODAY I AM SELF-SUFFICIENT, I AM  
12  COMPLETELY INDEPENDENT. THANK YOU TO RANCHO LOS AMIGOS  
13  HOSPITAL AND THE EXCELLENT STAFF THAT WORK THERE. DON'T YOU  
14  THINK THAT IT -- THAT RANCHO LOS AMIGOS SHOULD REMAIN OPEN?  
15  DON'T YOU THINK THAT RANCHO LOS AMIGOS SHOULD REMAIN OPEN AND  
16  YOU SHOULD DO EVERYTHING YOU CAN? YES, YES, IT SHOULD BE  
17  OPENED -- REMAIN OPEN. THERE ARE MILLIONS OF PEOPLE HERE AND  
18  OTHER PLACES THAT ARE EXACTLY RECEIVING -- RECEIVING THE  
19  BENEFITS THAT MANY OF US HAVE RECEIVED AND THEY ARE BECOMING  
20  SELF-SUFFICIENT AND THEY HAVE EXCITING LIVES. THANKS TO RANCHO  
21  LOS AMIGOS HOSPITAL. I THANK THE HOSPITAL A LOT AND THE STAFF  
22  AND, OF COURSE, THE GOVERNMENT. IF IT WEREN'T FOR THE  
23  HOSPITAL, MY MOTHER, MY FATHER, I WOULD HAVE LOST THEM.  
24  BECAUSE I LEARNED TO BE INDEPENDENT AND THEY, THEY DON'T WORRY  
25  TOO MUCH ABOUT ME ANYMORE. THANK YOU FOR RANCHO LOS AMIGOS.





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1

2 **SUP. BURKE, CHAIR:** THANK YOU. WOULD YOU STATE YOUR NAME AGAIN  
3 PLEASE?

4

5 **SPEAKER:** (Voice of Interpreter) ADOLF ASAGAVA.

6

7 **SUP. BURKE, CHAIR:** ADOLF ASAGAVA, ALL RIGHT, THANK YOU. YES,  
8 SIR?

9

10 **ED EWIN:** MY NAME IS ED EWIN. I WAS BORN WITH A RIGHT CLUB  
11 FOOT. MY FIRST OPERATION WAS WHEN I WAS 10 DAYS OLD. MY SECOND  
12 WAS WHEN I WAS FOUR. MY THIRD WAS WHEN I WAS SIX. MY LAST AND  
13 FOURTH WAS WHEN I WAS 13, AND I WAS 5-1/2 MONTHS IN THE  
14 HOSPITAL. I DID NOT HAVE A LIFT ON MY RIGHT SHOE BY ORDERS OF  
15 A DOCTOR UNTIL I WENT TO RANCHO LOS AMIGOS IN 1979. THAT WAS  
16 31 AND 1/2 YEARS AFTER MY LAST OPERATION. BY THAT TIME, I  
17 THOUGHT I WAS GOING TO BE IN THE WHEELCHAIR FOR THE REST OF MY  
18 LIFE. MY BACK HURT, MY HIP, MY LEG, AND MY FOOT. PAIN JUST  
19 ABOUT ALL THE TIME. MY HEALTH WAS STARTING TO BE GOOD WHEN  
20 RANCHO HAD TO STOP A FOOT AND SHOE CLINIC IN 1983 FOR ABOUT  
21 TWO TO FOUR YEARS. I WENT TO DR. CORDOVA. HE WAS MY RANCHO  
22 DOCTOR AND HAD AN OFFICE IN LONG BEACH, CALIFORNIA. I WENT TO  
23 HIM FOR A LONG TIME, BUT THEN MY BACK, HIP, AND LEG AND FOOT  
24 STARTED AGAIN. BECAUSE HE DID NOT HAVE THE SUPPORT GROUP THAT  
25 THEY HAD AT RANCHO. MY WIFE, LOIS, HAD POLIO WHEN SHE WAS FOUR



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1 YEARS OLD AND WENT TO RANCHO SINCE 1952. AT ONE TIME, SHE HAD  
2 A POST-POLIO APPOINTMENT AND I WENT WITH HER AND READ ABOUT  
3 THAT THEY WERE GOING TO START THE FOOT AND SHOE CLINIC AGAIN.  
4 I MADE AN APPOINTMENT AND THEY HAD TO GIVE ME NEW SHOES,  
5 REBUILD THE WHOLE THING BECAUSE MY SHOES DID NOT WORK. MY  
6 WIFE, LOIS, HAS GONE TO RANCHO FOR 51 YEARS AND SHE WALKED  
7 WITH CRUTCHES AND BRACES FOR 52. NOW, FOR THE PAST 14 YEARS,  
8 SHE HAS BEEN IN A WHEELCHAIR. AT THIS TIME, SHE HAS BEEN TOLD  
9 THAT SHE WILL BE LOSING THE USE OF HER BOTH ARMS BECAUSE OF  
10 CARPAL TUNNEL SYNDROME. AND WE ASK THAT YOU KEEP RANCHO LOS  
11 AMIGOS OPEN. THANK YOU.

12

13 **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH. NOW, ARE THERE OTHER  
14 PEOPLE THAT WE -- ALL RIGHT. AT THIS TIME, I'M GOING TO CALL  
15 UP LAURA BARRERA AND ALSO, FROM THE OFFICE OF ASSEMBLYMAN,  
16 MARCO FIREBAUGH, HIS REPRESENTATIVE. IS HE HERE? ARE YOU THE  
17 REPRESENTATIVE FROM -- ALL RIGHT. THAT'S FINE. THANK YOU VERY  
18 MUCH. AND THEN NEXT WE'RE GOING TO CALL UP A GROUP, DR.  
19 CYNTHIA STOTTS AND THE FOUR PEOPLE SHE'S GOING -- FROM L.A.  
20 U.S.C.: DR. THOMAS BURN, DR. RONALD KAUFMAN, AND DR. PETER  
21 GRUEN TO ADDRESS THE OTHER ISSUE BEFORE US.

22

23 **LAURA BARRERA:** OKAY, THANK YOU VERY MUCH FOR THE OPPORTUNITY  
24 TO SPEAK BEFORE YOU. MY NAME IS LAURA BARRERA, AND I'M THE  
25 DISTRICT DIRECTOR FOR THE MAJORITY FLOOR LEADER, MIKE ANTONIO



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1 FIREBAUGH. UNFORTUNATELY AS YOU KNOW HE IS IN SESSION, WASN'T  
2 ABLE TO ATTEND TODAY, BUT ON HIS BEHALF I AM PRESENTING A  
3 WRITTEN STATEMENT AND ACTUALLY I THINK IT'S BEING PASSED OUT  
4 TO YOU AT THIS POINT. AND WITH THAT, I'LL GO AHEAD AND READ  
5 HIS TESTIMONY AS WELL. AND I'LL SPEAK ON HIS BEHALF. "I WRITE  
6 TO EXPRESS MY CONTINUED OPPOSITION TO THE CLOSURE OF RANCHO  
7 LOS AMIGOS NATIONAL REHABILITATION CENTER AND ANNOUNCE MY  
8 SUPPORT FOR TRANSITIONING RANCHO TO A PRIVATE, NOT-FOR-PROFIT  
9 FACILITY. OVER THE LAST MONTH, I HAVE CLOSELY FOLLOWED THE  
10 MANY DISCUSSIONS SURROUNDING RANCHO'S FUTURE. IT HAS BECOME  
11 EVIDENT THAT THE NEED FOR RANCHO EXISTS AND IT WOULD BE A HUGE  
12 DISSERVICE TO NOT ONLY LOS ANGELES COUNTY, BUT TO THE STATE TO  
13 CLOSE SUCH AN EXCEPTIONAL FACILITY. THE NONPROFIT OPTION IS  
14 THE MOST FEASIBLE WAY FOR RANCHO TO CONTINUE PROVIDING  
15 SERVICES AT ITS CURRENT LEVEL. THERE ARE QUESTIONS TO BE  
16 ANSWERED ABOUT THE NONPROFIT OPTION, BUT THEY ARE QUESTIONS  
17 THAT DESERVE CONSIDERATION. I STRONGLY URGE THE INCLUSION OF  
18 THE FOLLOWING PROVISIONS IN THE TRANSITION PLAN: THE  
19 ESTABLISHMENT OF A CONTRACT BETWEEN THE COUNTY AND RANCHO FOR  
20 CONTINUED CARE FOR INDIGENT -- FOR THE INDIGENT POPULATION,  
21 THE INCLUSION OF RANCHO'S TRANSITION INTO THE COUNTY'S OVERALL  
22 PLAN FOR THE HEALTH SYSTEM AND THE RECOGNITION AND MAINTENANCE  
23 -- MAINTENANCE, YEAH, OF THE EXISTING UNION COLLECTIVE  
24 BARGAINING AGREEMENT, INCLUDING THE PROTECTION OF HEALTH  
25 BENEFITS AND PENSIONS FOR THEIR WORKERS. I RESPECTFULLY URGE



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1 YOU TO REFRAIN FROM HOLDING A CLOSURE VOTE AND ALLOW FURTHER  
2 DELIBERATION ON RANCHO'S POSSIBLE FUTURE AS A NONPROFIT  
3 CENTER." THE ASSEMBLYMAN IS OPEN AND IS AVAILABLE IN THE  
4 CONTINUATION OF THIS -- OF THE TRANSITION OF RANCHO LOS  
5 AMIGOS. SO WITH THAT, I THANK YOU. IF THERE ARE ANY QUESTIONS,  
6 WE WILL -- IF THERE ARE ANY QUESTIONS, I REQUEST THAT THEY BE  
7 IN WRITING AND A RESPONSE WILL BE MADE IN WRITING AS WELL.  
8 THANK YOU.

9

10 **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH. AND IS THIS -- ARE YOU  
11 DR. CYNTHIA STOTTS?

12

13 **DR. CYNTHIA STOTTS:** YES, I AM.

14

15 **SUP. BURKE, CHAIR:** DO YOU HAVE THREE OTHER PEOPLE WHO ARE  
16 GOING TO BE UP THERE WITH YOU? I SEE THEM COMING UP. ALL  
17 RIGHT. THANK YOU VERY MUCH.

18

19 **DR. CYNTHIA STOTTS:** HONORABLE SUPERVISORS, MY NAME IS DR.  
20 CYNTHIA STOTTS, AND I'M THE PRESIDENT OF THE MEDICAL STAFF AT  
21 L.A. COUNTY U.S.C. I WANT TO BRING TO YOUR ATTENTION THE  
22 CONCERNS OF YOUR DOCTORS ON THE FRONT LINE. OUR DAILY CENSUS  
23 AT COUNTY U.S.C. IS AT OR ABOVE OUR BUDGETED DEBTS. IT'S  
24 IMPORTANT TO KNOW THAT THE CENSUS FIGURES DO NOT INCLUDE THE  
25 TYPICALLY 30 PATIENTS WHO WAIT A HALF TO THREE DAYS IN OUR



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1 OVERCROWDED EMERGENCY ROOMS TO BE ADMITTED. INPATIENTS WAIT  
2 WEEKS FOR SURGERIES FOR FRACTURES AND OUTPATIENTS WAIT YEARS  
3 FOR GALLBLADDER SURGERIES. WAITING CAUSES SIMPLE MEDICAL  
4 PROBLEMS TO BECOME COMPLEX AND UNNECESSARILY EXPENSIVE. WHEN  
5 THE SYSTEM CANNOT PROVIDE ADEQUATE SERVICES, THE LIVES OF  
6 PATIENTS AND THE LICENSES OF THE VERY DOCTORS AND NURSES WHO  
7 CARE FOR THEM ARE PLACED IN JEOPARDY. THE CONCEPT THAT THE  
8 PRIVATE SECTOR CAN CARE FOR FUNDED PATIENTS IS FALSE. EVERY  
9 DAY WE CARE FOR PRIVATELY INSURED PATIENTS WHO ARE TRANSFERRED  
10 TO COUNTY BECAUSE THERE ARE NO OPEN BEDS AT THEIR OWN PRIVATE  
11 HOSPITALS. THE LOSS OF BEDS AT RANCHO WILL FILL I.C.U. BEDS  
12 NEEDED FOR TRAUMA. THIS IS NOT A PROBLEM OF THE UNINSURED  
13 BECAUSE YOUR INSURANCE CARD WON'T WORK IF THEIR BEDS ARE FULL.  
14 THIS IS A PROBLEM OF THE INSURED. WHILE THE HEALTH OF  
15 CALIFORNIANS -- WHILE THE HEALTH OF CALIFORNIANS AND AMERICANS  
16 IS DEFINITELY MEASURABLY IMPROVED, HEALTHCARE IN THE U.S. IS  
17 CRITICALLY ILL, AND IN CALIFORNIA, HEALTHCARE IS FRANKLY  
18 DYING. THE STATES AND FEDS HAVE TAKEN OUR TAX DOLLARS AND LEFT  
19 LOCAL GOVERNMENT STRUGGLING TO PROVIDE BASIC SERVICES. THAT IS  
20 WRONG. THE CITIZENS OF LOS ANGELES VOTED WITH THEIR  
21 POCKETBOOKS TO SUPPORTED THE TRAUMA SYSTEM. THE MATH IS  
22 SIMPLE. THERE ARE NOT ENOUGH BEDS AT COUNTY U.S.C. RIGHT NOW.  
23 THERE ARE NOT ENOUGH ADEQUATE BEDS IN PRIVATE HOSPITALS RIGHT  
24 NOW. THERE ARE MORE UNINSURED ON THE WAY. CONSERVATIVE  
25 ESTIMATES OF 150,000 PEOPLE IN L.A. WILL LOSE THEIR Medi-Cal.



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1 CLOSING RANCHO WILL RESULT IN 3,000 PATIENTS A YEAR, A HALF,  
2 1,500, WILL COME TO COUNTY IN OUR ENCASHMENT AREA. CLOSING A  
3 HUNDRED BEDS AT COUNTY THAT ARE ALREADY FULL WILL RESULT IN  
4 6,000 PATIENTS A YEAR GOING WHERE? AND SOCIETY EXPECTS US TO  
5 BE READY FOR SMALLPOX AND ANTHRAX OUTBREAKS WHICH WILL REQUIRE  
6 EVEN MORE ISOLATION ROOMS. YOUR DOCTORS SIMPLY ASK YOU, WHERE  
7 WILL THE SICK AND DYING GO? WHERE ELSE CAN THEY GO BUT TO OUR  
8 OVERTLY FILLED, ALREADY-CROWDED EMERGENCY ROOMS WHEN THEY ARE  
9 TOO SICK TO WAIT AT HOME. SIMPLY SHUTTING DOWN BEDS, CLOSING  
10 THE BACK DOOR, AND FORCING THE OVERFILLED FRONT DOOR TO OPEN  
11 EVEN WIDER WILL RESULT IN PATIENTS SUFFERING NEEDLESSLY AND  
12 EXPENSIVELY. AS PATIENTS AND PHYSICIANS, WE HAVE DEDICATED OUR  
13 LIVES TO PRESERVING LIFE. WE CAN'T AND WE WON'T CONTRIBUTE TO  
14 HARM. IN A DEFICIT ECONOMY, WE HAVE THE MORAL OBLIGATION TO  
15 SPEND OUR DOLLARS REASONABLY. WE AS PHYSICIANS ARE COMMITTED  
16 TO STREAMLINING CARE, BUT ANY REDUCTION IN BEDS HAS TO BE DONE  
17 IN A MATTER THAT DOES NOT PLACE A PATIENT'S LIVES AT RISK.  
18 FUNDING MUST BE FOUND, BUT UNTIL IT ARRIVES, ALLOW THE DOCTORS  
19 AND ADMINISTRATORS TO IMPLEMENT THOSE SAVINGS THAT WILL BE  
20 NEEDED TO BALANCE THE BUDGET WHILE PRESERVING THE PUBLIC  
21 SAFETY NET. THANK YOU FOR YOUR ATTENTION. AND, MORE  
22 IMPORTANTLY, THANK YOU FOR YOUR SUPPORT.

23

24 **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH.

25



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1 **RONALD KAUFMAN:** MADAM CHAIR, HONORABLE MEMBERS OF THE BOARD, I  
2 DON'T ENVY YOUR DECISION TODAY. I'M RONALD KAUFMAN, AS YOU ALL  
3 KNOW, SENIOR ASSOCIATE DEAN FOR ADMINISTRATION TECH SCHOOL OF  
4 MEDICINE U.S.C. FORMERLY CHIEF MEDICAL OFFICER L.A. COUNTY  
5 U.S.C., HEALTHCARE NETWORK WHICH INCLUDES THE MEDICAL CENTER  
6 AND THREE COMPREHENSIVE HEALTH CENTERS. YOU ALL KNOW WHAT THE  
7 CRITERIA WERE FOR THE SCENARIO PLANNING IN SCENARIOS TWO AND  
8 THREE HAVING TO DO WITH PRODUCING LEAST HARM, MAINTAINING  
9 GEOGRAPHIC ACCESS, CONSISTENCY WITH YOUR PROPOSED REDESIGN,  
10 TAKING INTO ACCOUNT COMMUNITY CHARACTERISTICS, THE  
11 AVAILABILITY OF PRIVATE SECTOR RESOURCES AND THE D.H.S.  
12 FACILITY CHARACTERISTICS. I'M HERE TO BRING ONLY TWO ISSUES TO  
13 YOUR ATTENTION. THE FIRST IS THE BOARD DEVELOPED AND ENDORSED  
14 THE MEASURE B, ADVOCATING THE NEED TO PRESERVE EMERGENCY AND  
15 TRAUMA SERVICES. AT THE TIME OF THE PASSAGE, THERE WAS A  
16 PUBLIC PRONOUNCEMENT THAT THIS ENABLED THE BOARD TO PRESERVE  
17 HARBOR AND OLIVE VIEW MEDICAL CENTERS. UNFORTUNATELY, THE  
18 DECISION TO PROPOSE THE CLOSURE OF A HUNDRED BEDS AT L.A.  
19 COUNTY U.S.C. IS IN CONFLICT WITH THOSE PROMISES MADE TO THE  
20 ELECTORATE PRIOR TO THE ELECTION. L.A.C./U.S.C. MAKES UP ABOUT  
21 30% OF THE TRAUMA SYSTEM, A SIGNIFICANT FRACTION OF THE  
22 EMERGENCY SYSTEM AND HALF OF THE ENTIRE COUNTY HEALTH SYSTEM.  
23 ELIMINATING A HUNDRED BEDS OR 50 BEDS AT THAT FACILITY THAT  
24 SITS IN THE CENTER OF THE POPULATION WILL IMPACT THE ENTIRE  
25 TRAUMA SYSTEM THAT THE ELECTORATE VOTED TO SAVE. THE COMBINED





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1 IMPACTS OF BED DECREASE AND RANCHO CLOSURE WILL SEVERELY  
2 CONGEST THE HOSPITAL AND MAKE A BAD SITUATION IN THE EMERGENCY  
3 DEPARTMENT EVEN WORSE. THE SECOND ISSUE IS THE OPERATIONAL  
4 IMPACT OF THIS PROPOSAL HAS NOT BEEN ADEQUATELY PLANNED FOR.  
5 BED CLOSURES CAN OCCUR, BUT SITUATION ANALYSIS FOR THE  
6 RESULTANT OPERATIONAL DELAYS HAVE NOT BEEN PLANNED FOR.  
7 WITHOUT PLANNING FOR ADEQUATE DIVERSION OF THE INCOMING  
8 TRAFFIC, THE PROFESSIONAL LIVES OF THE LICENSED PERSONNEL WILL  
9 BE AT RISK. THIS PROPOSAL SIMPLY SHIFTS THE BUDGETARY PROBLEM  
10 DOWNHILL WITHOUT ADEQUATE PLANNING FOR IMPLEMENTATION.  
11 INTERESTINGLY, L.A. COUNTY U.S.C. IS EQUAL TO THE COMBINED  
12 CENSUS OF HARBOR, MARTIN LUTHER KING, AND OLIVE VIEW. THE  
13 EXISTING DISTRIBUTION OF PEOPLE ACROSS OUR SYSTEM REPRESENTS  
14 WHERE OUR PATIENTS' CHOICES FOR CARE LIE. THAT'S BASED ON THE  
15 SITE OF INJURY, WHERE THEY WORK OR LIVE. THE BOARD JUSTIFIES  
16 THE ELIMINATION OF A HUNDRED BEDS BY ITS PRIOR DECISION FOR  
17 THE 600 BED. THIS CURTAILMENT IS IN THE ABSENCE OF THE NEW  
18 HOSPITAL DESIGN AND THE EFFICIENCIES THAT IT WOULD BRING.  
19 THEREFORE, IT'S PREMATURE. I UNDERSTAND THE MANDATES FOR  
20 SHORTFALLS, I UNDERSTAND THE LOGICAL FACT-BASED APPROACH  
21 D.H.S. TOOK IN ITS JUNE DOCUMENT. HOWEVER, I'M AT A LOSS TO  
22 UNDERSTAND THIS PARTICULAR PROPOSAL WHICH SO ADVERSELY AFFECTS  
23 THE MOST DENSELY POPULATED AREA WITH THE HIGHEST RATE OF  
24 FAMILIES LIVING WITHOUT INSURANCE AND BELOW THE POVERTY LEVEL,  
25 ACCORDING TO THE U.C.L.A. CENTER FOR HEALTH POLICY RESEARCH.



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1 APPROXIMATELY 50% OF RANCHO -- I'LL FINISH IN A SEC --  
2 APPROXIMATELY 50% OF THE RANCHO CLOSURE WILL AFFECT THE SAME  
3 GEOGRAPHIC AREA L.A. COUNTY U.S.C. THERE ARE 3,000 PATIENTS  
4 ADMITTED TO RANCHO WHICH WOULD MEAN ABOUT 1,500 PATIENTS WILL  
5 BACK UP EACH YEAR AT L.A. COUNTY U.S.C. I'M AT A LOSS TO  
6 UNDERSTAND WHAT WE'RE GOING TO DO WITH THE OVER 6,000 PATIENTS  
7 THAT GO THROUGH THE HUNDRED BEDS AT L.A. COUNTY U.S.C. PLUS  
8 THOSE ADDITIONAL 1,500. THIS CLEARLY VIOLATES THE ORIGINAL  
9 PLANNING CRITERIA AND WILL RESULT IN THIS SITUATION OF A  
10 PATIENT NEEDING ADMISSION IN THE EMERGENCY DEPARTMENT  
11 HAPPENING 20 TIMES A DAY. THANK YOU FOR YOUR ATTENTION.

12

13 **SUP. BURKE, CHAIR:** THANK YOU. [ Applause ].

14

15 **SUP. BURKE, CHAIR:** WE WILL BE CALLING JACK SHAIKLEY AND  
16 HARRIET GILL AT THE CONCLUSION OF THIS PRESENTATION.

17

18 **DR. THOMAS BERNE:** MY NAME IS DR. THOMAS BERNE. I AM THE CHIEF  
19 PHYSICIAN IN THE DEPARTMENT OF SURGERY AT L.A. COUNTY U.S.C.  
20 MEDICAL CENTER. AND I WORKED THERE FOR THE PAST 42 YEARS  
21 TAKING CARE OF TRAUMA PATIENTS AND EMERGENCY SURGICAL PATIENTS  
22 THAT COME TO US. I WANTED TO PUT THIS IN SORT OF REAL TERMS  
23 TOO. WE'VE SPOKEN ABOUT THE PROBLEMS WITH NOT HAVING ENOUGH  
24 BEDS. AND I JUST WANTED TO REVIEW SOME OF THE THINGS THAT  
25 REALLY HAPPEN WHEN YOU DON'T HAVE ENOUGH BEDS, AND WE DO NOT



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1 HAVE ENOUGH BEDS NOW. WE HAVE A PERPETUALLY OVERCROWDED AND  
2 FREQUENTLY JAMMED EMERGENCY ROOM. THAT MAKES EVALUATION AND  
3 TREATMENT OF PATIENTS IN THAT AREA DIFFICULT AND DEHUMANIZING.  
4 INTENSIVE CARE BEDS CANNOT BE OPENED, EVEN WHEN PATIENTS COULD  
5 SAFELY BE MOVED OUT OF AN I.C.U. BED BECAUSE THERE ARE OFTEN  
6 NO WARD BEDS OR LOWER LEVEL MORE MONITORED, WHAT WE CALL  
7 C.M.A. BEDS AVAILABLE. SERIOUSLY-ILL PATIENTS WHO SHOULD BE IN  
8 I.C.U. OR C.M.A. BEDS REMAIN IN THE EMERGENCY ROOM FOR LONG  
9 PERIODS OF TIME, AT A LOWER LEVEL OF CARE THAN THEY SHOULD  
10 RECEIVE. PATIENTS AWAITING EXTENSIVE OPERATIONS, OFTEN FOR  
11 CANCER, CANNOT RECEIVE SCHEDULED SURGERIES BECAUSE THERE ARE  
12 NO I.C.U. BEDS TO PUT THEM IN POSTOPERATIVELY. PATIENTS CANNOT  
13 BE MOVED OUT OF OPERATING ROOMS AT THE END OF EMERGENCY CASES,  
14 OFTEN THESE ARE TRAUMA PATIENTS, BECAUSE OF THE UNAVAILABILITY  
15 OF I.C.U. BEDS. PATIENTS TRANSFERRED TO US FOR HIGHER LEVELS  
16 OF CARE BUMP CRITICALLY ILL PATIENTS OUT OF I.C.U. BEDS INTO  
17 LOWER LEVELS OF CARE WHERE THEY ARE INADEQUATELY CARED FOR.  
18 EFFORTS TO KEEP PATIENTS FLOWING IN A SAFE MANNER CONSUMED A  
19 TREMENDOUS AMOUNT OF PHYSICIAN, NURSING, AND ADMINISTRATIVE  
20 TIME AND DEGRADE THE QUALITY OF TRAINING, RECRUITMENT, AND  
21 RETENTION AT ALL OF THOSE LEVELS. I SIMPLY WANTED TO POINT OUT  
22 BY MAKING THESE EXAMPLES THAT ANY FURTHER REDUCTION IN BED  
23 AVAILABILITY AT THE MEDICAL CENTER WILL ALMOST CERTAINLY  
24 REQUIRE LIMITING OF E.R. ACCESS AND HOSPITAL ADMISSIONS TO  
25 MAINTAIN A SAFE MEDICAL ENVIRONMENT. THE POTENTIAL EFFECT ON



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1 TRAUMA CARE IN THIS COUNTY OF SUCH CLOSURES IS GRAVE. THANK  
2 YOU.

3

4 **PETER GRUEN:** MY NAME IS PETER GRUEN. I WORK AT THE L.A. COUNTY  
5 HOSPITAL. I'VE BEEN WORKING IN THE DEPARTMENT OF NEUROSURGERY  
6 FOR 15 YEARS AND I JUST WANTED TO EXPRESS HOW PROUD I AM OF A  
7 LOT OF THE PATIENTS THAT I'VE BEEN TAKING CARE OF FOR THE PAST  
8 15 YEARS, A LOT OF THE SPINAL CORD INJURED PATIENTS AND HEAD  
9 INJURED PATIENTS WHO WE DEVOTE AN INCREDIBLE AMOUNT OF TIME  
10 AND EFFORT TO SAVING THEIR LIVES AND BASICALLY WHEN THEY'RE  
11 TRANSFERRED OUT OF MY I.C.U., MOST OF THEM, OR A LOT OF THEM  
12 ARE COMATOSE, A LOT OF THEM ARE BED BOUND, AND IT IS SO  
13 AMAZING TO ME TO SEE THESE PEOPLE COMING HERE TODAY TALKING,  
14 IN WHEELCHAIRS, PRODUCTIVE. MAKES ME REALIZE WHAT A TERRIFIC  
15 JOB WE'RE DOING AT THE L.A. COUNTY HOSPITAL TO TAKE CARE OF  
16 THESE INJURED PEOPLE, AND I REALLY HOPE THAT YOU CAN FIGURE  
17 OUT A WAY TO LET US DO THE JOB THAT WE NEED TO DO. I DON'T  
18 THINK THAT CUTTING A HUNDRED BEDS IS IN THE BEST INTEREST OF  
19 OUR PATIENTS, BUT I ALSO WANT TO EXPRESS WHAT A TERRIFIC PLACE  
20 RANCHO IS, HOW MUCH WE NEED IT, AND IN ORDER FOR ME TO DO MY  
21 JOB, I CAN ONLY DO PART OF THE JOB. THE REST OF THE JOB OF  
22 TAKING CARE OF SOMEBODY WITH A SEVERE BRAIN OR SPINAL CORD  
23 INJURY HAS TO BE DONE IN A PLACE LIKE RANCHO AND THERE IS NO  
24 OTHER PLACE IN SOUTHERN CALIFORNIA THAT DOES WHAT RANCHO DOES.

25 [ Applause ]



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1

2 **PETER GRUEN:** THANK YOU VERY MUCH.

3

4 **SUP. BURKE, CHAIR:** WE'LL NOW HAVE JACK SHAIKLEY AND HARRIET  
5 GILL COME FORWARD. WE RECOGNIZE THAT THEY HAVE A PLANE TO  
6 CATCH. AND I APPRECIATE THESE PHYSICIANS WHO'VE STAYED HERE.  
7 WE NEED THEM ON THE JOB, BUT WE WILL TRY TO GET THEM UP AS  
8 FAST AS POSSIBLE. IF YOU CAN GET THE ONES THAT ARE HERE -- IF  
9 THERE ARE PHYSICIANS WHO DON'T HAVE URGENCY AND THEY WANT TO  
10 REMAIN, OKAY, BUT THOSE WHO DO HAVE TO GET BACK, IF YOU'LL LET  
11 US HAVE YOUR NAMES AND WE'LL CALL YOU RIGHT AWAY. I HAVE  
12 EVERYONE'S NAME. I THINK I HAVE THEM UNDERLINED. ALL RIGHT,  
13 I'M SORRY.

14

15 **JACK SHAIKLEY:** THANK YOU, MADAM CHAIRMAN. LADIES AND  
16 GENTLEMEN, THE BOARD OF SUPERVISORS, WE WOULD LIKE TO MAKE OUR  
17 PRESENTATION AS ONE. I WOULD LIKE TO MAKE OPENING COMMENTS AND  
18 THEN CLOSING COMMENTS, IF THAT WOULD BE ALL RIGHT, TO THE  
19 BOARD. MY NAME IS JACK SHAIKLEY, I'M THE PRESIDENT OF THE  
20 CALIFORNIA COMMUNITY FOUNDATION. THE CALIFORNIA COMMUNITY  
21 FOUNDATION IS PRIMARILY RESPONSIBLE FOR MAKING GRANTS IN LOS  
22 ANGELES COUNTY, AND ABOUT 40 PERCENT OF OUR GRANTS GO TO  
23 HEALTHCARE FACILITIES IN THE COUNTY. FOR THE LAST TWO YEARS,  
24 WE'VE BEEN WORKING WITH RANCHO LOS AMIGOS FOUNDATION ACTUALLY  
25 MANAGING THE ENDOWMENT OF THAT FOUNDATION, AND IT OCCURRED TO



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1 US THAT OF THE MANY OPTIONS THAT ARE BEING PRESENTED TO KEEP  
2 RANCHO LOS AMIGOS OPEN, NOT ONE OF THOSE 13 OPTIONS INCLUDED  
3 THE CREATION OF A PRIVATE NONPROFIT TAX EXEMPT ORGANIZATION.  
4 THAT'S NOT SURPRISING WHEN I DO MY OWN THINKING ABOUT MY  
5 CRISIS'S, I DON'T THINK ABOUT STARTING A GOVERNMENT, BUT VERY  
6 OFTEN THAT MAY BE A GOOD THING TO DO. WE ASKED THE BOARD OF  
7 SUPERVISORS IF IT WOULD BE ALL RIGHT IF WE COMMISSIONED A  
8 REPORT TO LOOK AT THE OPTIONS THAT INCLUDED NOT ONLY KEEPING  
9 IT AS A COUNTY FACILITY, BUT AS A HEALTH AUTHORITY HOSPITAL  
10 AND AS A PRIVATE TAX EXEMPT NONPROFIT ORGANIZATION. WE HIRED  
11 GILL BASANO TO MAKE THAT REPORT. I HAVE THE REPORT WITH ME AND  
12 I WOULD ASK THAT THAT REPORT BE INCLUDED IN THE PUBLIC RECORD  
13 AT THIS TIME, AND I WOULD LIKE TO INTRODUCE HARRIETT GILL, WHO  
14 WILL DISCUSS THAT REPORT.

15

16 **SUP. BURKE, CHAIR:** THANK YOU, THANK YOU AND WE'LL GIVE YOU  
17 ADDITIONAL TIME.

18

19 **HARRIETT GILL:** THANK YOU. AS PART OF OUR STUDY, WE WERE ASKED  
20 TO LOOK AT RANCHO LOS AMIGOS FROM BOTH AN OPERATIONAL  
21 STANDPOINT AS WELL AS THE ENTIRE MARKET OF LOS ANGELES COUNTY  
22 TO LOOK AT THE BED NEED FOR REHABILITATION BEDS AND THE  
23 ABILITY OF THE COUNTY TO BE ABLE TO CARE FOR PATIENTS THAT ARE  
24 CURRENTLY BEING CARED FOR BY RANCHO IF RANCHO IS NOT IN  
25 EXISTENCE. I'LL START WITH THE OPERATIONAL ASSESSMENT THAT WE



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1 DID, AND ESSENTIALLY, PREFACE THAT BY THE FACT THAT AS A FIRM,  
2 WE DO A SIGNIFICANT AMOUNT OF WORK WITH REHABILITATION,  
3 PARTICULARLY MEDICAL REHABILITATION PROVIDERS AND HAVE WORKED  
4 WITH AT LEAST FIVE OF THE TOP 10 REHABILITATION PROVIDERS AND  
5 THEREFORE CAN BEGIN TO LOOK AT RANCHO RELATIVE TO ITS PEERS  
6 ACROSS THE COUNTRY. AS ALL OF YOU HAVE KNOWN AND AS OTHER  
7 PEOPLE HAVE SAID, RANCHO IS WITHIN THE TOP 10 U.S. NEWS AND  
8 WORLD REPORT. IT HAS CONSISTENTLY BEEN THERE FOR MANY YEARS.  
9 IT'S THERE FOR A LOT OF REASONS. ONE, BY VIRTUE OF ITS  
10 ACADEMIC PROWESS AND THE FACT THAT THE U.S. NEWS AND WORLD  
11 REPORT IS ESSENTIALLY DETERMINED BY ACADEMIC ADMISSIONS.  
12 HOWEVER I THINK IT'S ALSO KNOWN BECAUSE OF ITS OUTCOME STUDIES  
13 THAT HAVE BEEN DONE IN COMPARING THEM WITH NATIONAL NORMS. IT  
14 RETURNS MORE PEOPLE TO HOME THAN ITS PEERS. ITS FUNCTIONAL  
15 OUTCOMES ARE HIGHER THAN ITS PEERS. IT DOES SIGNIFICANT  
16 AMOUNTS OF RESEARCH AND EDUCATION AND HAS CONSISTENTLY BEEN  
17 WITHIN THE NATIONAL INSTITUTES OF DISABILITY, REHABILITATION  
18 AND RESEARCH AND HAS BEEN PART OF THE SPINAL CORD INJURY MODEL  
19 SYSTEMS PROGRAM SINCE ITS INCEPTION IN THE LATE '80s. PART OF  
20 WHAT MAKES RANCHO SO GOOD IS THE FACT THAT IT ALSO PROVIDES  
21 ACUTE CARE TO PEOPLE WITH DISABILITIES AND THEREFORE AS I  
22 THINK A LOT OF THE PEOPLE HERE SAID, IT PROVIDES A LOT OF  
23 PRIMARY CARE FOR FOLKS WITH SPINAL CORD AND HEAD INJURY, THEIR  
24 NEEDS FOR PRIMARY CARE ARE USUALLY NOT WITHIN THE EXPERTISE OF  
25 THE LOCAL COMMUNITY AND BEING ABLE TO MANAGE THEIR CARE. ONE





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1 OF THE ISSUES I THINK FOR US WHEN WE LOOKED AT WHO THEY WERE  
2 THAT MADE THINGS KIND OF INTERESTING, IF NOT TO A CERTAIN  
3 DEGREE PERVERSE, WHEN WE LOOK AT WHO THEY ARE, AND THAT IS THE  
4 FACT THAT THEIR LACK OF ACCESS TO MANAGED CARE CONTRACTS,  
5 WHILE THEY ARE THE GEM OF LOS ANGELES, MAKES THEM ALSO NOT  
6 NECESSARILY ACCESSIBLE TO THOSE INDIVIDUALS WHO MAY HAVE  
7 PRIVATE INSURANCE, AND WE FOUND THAT IN PART OF OUR  
8 RECOMMENDATIONS, THAT BEING ABLE TO OPEN UP TO INDIVIDUALS  
9 WITH PRIVATE INSURANCE WOULD BE AN ASSET TO THE ORGANIZATION.  
10 AS PART OF THE STUDY AS WELL, WE DID A BED NEED ASSESSMENT FOR  
11 REHABILITATION BEDS IN LOS ANGELES COUNTY AND ESSENTIALLY  
12 FOUND THAT RIGHT NOW, TODAY, THERE IS A NEED FOR SOMEWHERE  
13 BETWEEN 150 AND 200 REHABILITATION BEDS, SO WE DO FIND  
14 OURSELVES IN A SHORTAGE. WE COMPARED LOS ANGELES COUNTY TO  
15 NATIONAL NORMS AND ALSO DID A POPULATION-BASED STUDY THAT WAS  
16 LOOKING AT THE AGE-ADJUSTED POPULATION IN L.A. COUNTY AND WHAT  
17 THEIR NEEDS WOULD BE. MORE IMPORTANTLY, WHEN WE LOOK AT WHO  
18 RANCHO LOS AMIGOS IS IN TERMS OF THEIR PATIENT POPULATION, WE  
19 FOUND A NEED FOR 71 SPINAL CORD INJURY BEDS AND 61 TRAUMATIC  
20 BRAIN INJURY BEDS IN THE COUNTY. THE ABSENCE OF RANCHO'S BEDS  
21 MAKE THAT AMOUNT -- THOSE BEDS SIGNIFICANTLY LIMITED SINCE  
22 THAT'S THE MAJOR BUSINESS THAT RANCHO IS IN. WHEN WE LOOK AT  
23 THE CLOSING OF RANCHO, WE FIND A DECREASE IN BEDS THAT REALLY  
24 LEAVES LOS ANGELES COUNTY WITH A 30% SHORTFALL IN  
25 REHABILITATION BEDS. THE VAST MAJORITY OF THEM BEING THE HIGH



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1 CATASTROPHIC POPULATION. WHEN WE DID THE BED NEED WE THEN WENT  
2 OUT TO SAY WELL WHO ELSE IS OUT THERE THAT MIGHT BE ABLE TO  
3 MEET THE NEEDS OF THE SPINAL CORD AND HEAD INJURY POPULATION,  
4 AND FOUND ONLY TWO OTHER PROVIDERS WHO SPECIALIZED IN SPINAL  
5 CORD INJURY AND HEAD INJURY REHABILITATION IN L.A. COUNTY, AND  
6 BOTH OF THESE FACILITIES ARE FAIRLY SMALL: ONE OF THESE WITH  
7 26 BEDS, AND THAT'S NORTHRIDGE, AND ONE WITH 40 BEDS, AND  
8 THAT'S ST. JUDE'S, SO CLEARLY NOT AN ABILITY TO MANAGE WELL  
9 OVER 130 BEDS THAT ARE THE REQUIREMENT OF THE COUNTY. THE  
10 REMAINDER OF THE PROVIDERS ARE QUITE SMALL AND ONE OF THE  
11 THINGS THAT WE LOOK AT WHEN WE LOOK AT REHABILITATION,  
12 PARTICULARLY WITH TERTIARY LEVEL CARE WHICH IS SPINAL CORD  
13 INJURY AND HEAD INJURY, THAT YOU NEED ENOUGH CRITICAL MASS OF  
14 LIKE POPULATIONS TO PROVIDE THE EXPERTISE THAT RANCHO  
15 PROVIDES. THEY MANAGE SIGNIFICANT NUMBERS, AS YOU HEARD TODAY,  
16 OF SPINAL CORD INJURY AND HEAD INJURY PATIENTS. THE REMAINDER  
17 OF THE REHABILITATION UNITS IN THE COUNTY ARE REALLY UNDER 30  
18 BEDS AND WOULD NEVER HAVE THE CRITICAL MASS TO PROVIDE THE  
19 EXPERTISE THAT WE'RE LOOKING AT. SO CLEARLY, I THINK WHEN WE  
20 LOOKED AT LOS ANGELES COUNTY, WE TRULY BELIEVE THAT THERE IS A  
21 NEED FOR REHABILITATION BEDS, THERE'S A NEED RELATIVE TO OUR  
22 OWN BENCHMARKS THAT WE USE INTERNALLY IN OUR FIRM AS WELL AS  
23 BENCHMARKS AGAINST THE NATION. THERE'S AN INTERNAL DEMAND FOR  
24 THE COUNTY HOSPITALS OF APPROXIMATELY 91 BEDS AND WE FOUND  
25 THAT JUST BY VIRTUE OF THE PATIENTS THAT ARE MOVED FROM THE



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1 COUNTY HOSPITALS INTO RANCHO. AS I SAID, THERE'S INSUFFICIENT  
2 CAPACITY TO ABSORB RANCHO PATIENTS WITHIN THE COUNTY, BUT WE  
3 ALSO BELIEVE THAT IF YOU LOOK AT EVERY MAJOR METROPOLITAN CITY  
4 IN THE UNITED STATES, EVERY ONE OF THEM HAS A STELLAR  
5 REHABILITATION PROVIDER. THE CLOSURE OF RANCHO WOULD MEAN THAT  
6 LOS ANGELES AND THE LOS ANGELES AREA WOULD BE ONE OF THE FEW  
7 LARGE CITIES OR LARGE METROPOLITAN AREAS WITHOUT A RANCHO, BUT  
8 IN OUR FINAL ANALYSIS, WHAT WE DID FIND THAT A LOT OF THE  
9 SERVICES AND PROGRAMS THAT ARE PROVIDED BY RANCHO LOS AMIGOS  
10 ARE NOT NECESSARILY THE REQUIREMENT THAT THE COUNTY GOVERNMENT  
11 BE ABLE TO FUND THAT, AND WHEN WE LOOK AT THEIR PEERS, WE FIND  
12 THAT THE VAST MAJORITY OF THEIR PEERS ARE NOT-FOR-PROFIT AND  
13 THAT ENDOWMENT MONEY FUNDS A SIGNIFICANT AMOUNT OF SOME OF THE  
14 NON-MEDICAL SERVICES THAT COME TO LABEL WHO RANCHO IS AND THE  
15 QUALITY OF THE WORK THAT THEY DO. OUR CONCLUSIONS ESSENTIALLY  
16 SAID THAT WE BELIEVE AT THIS POINT, ASSUMING ADDITIONAL STUDY,  
17 THAT IT IS FEASIBLE FOR RANCHO TO CONVERT TO A PRIVATE NOT-  
18 FOR-PROFIT TAX EXEMPT ORGANIZATION AND THAT WAS OUR FINAL  
19 CONCLUSION, AND I WILL LEAVE THE REST TO JACK.

20  
21 **JACK SHAIKLEY:** WE AGREE ENTIRELY WITH THE REPORT AND WE WOULD  
22 LIKE TO URGE THE BOARD OF SUPERVISORS TO CONSIDER THE CREATION  
23 OF A PRIVATE TAX EXEMPT NONPROFIT ORGANIZATION. I ALSO WANT TO  
24 MAKE IT CLEAR THAT WE BELIEVE IN THE CALIFORNIA COMMUNITY  
25 FOUNDATION THAT THIS IS NOT ENTIRELY THE RESPONSIBILITY OF THE



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1 BOARD OF SUPERVISORS NOR IS IT THE RESPONSIBILITY OF THE  
2 COUNTY DEPARTMENT OF HEALTH. THIS IS THE RESPONSIBILITY OF  
3 EVERY CITIZEN IN THE COMMUNITY OF LOS ANGELES, OUR  
4 FOUNDATIONS, OUR INDIVIDUAL PHILANTHROPISTS WHO HAVE STEPPED  
5 UP TO THE PLATE IN OTHER CITIES AND CAN DO SO AGAIN. THANK  
6 YOU.

7

8 **SUP. BURKE, CHAIR:** YES. [ Applause ].

9

10 **JACK SHAIKLEY:** ANY QUESTIONS? ANY QUESTIONS YOU WANT TO ASK,  
11 YES?

12

13 **SUP. YAROSLAVSKY:** WE MET YESTERDAY FOR QUITE A WHILE AND  
14 TALKED ABOUT WHAT YOU JUST CLOSED YOUR STATEMENT WITH, AND I  
15 JUST WANT TO ASK YOU, HOW LONG WOULD IT TAKE YOU TO ASSESS THE  
16 LEVEL OF COMMITMENT FROM THE CHARITABLE COMMUNITY, THE  
17 FOUNDATIONS AND OTHERS WHO MIGHT BE INTERESTED.

18

19 **JACK SHAIKLEY:** TWO LEVELS OF THAT, BUT I BELIEVE WITHIN 60  
20 DAYS WE CAN HAVE THAT ASSESSED. WE WOULD NEED TO GET A PACKAGE  
21 OF LOANS AND GRANTS TOGETHER FROM THE USUAL SUSPECTS, THE  
22 HEALTHCARE FOUNDATIONS AND SOME OF THE INDIVIDUALS HERE IN LOS  
23 ANGELES. WE'D ALSO NEED TO SEE A BUSINESS PLAN THAT -- WHERE  
24 YOU COULD HELP US WITH. AS I HAD MENTIONED TO YOU, OTHER  
25 HOSPITALS AROUND THE COUNTRY WHO HAVE A RECOGNITION EQUAL TO



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1 THE RANCHO LOS AMIGOS RAISE TENS OF MILLIONS OF DOLLARS FROM  
2 THE PRIVATE SECTOR EVERY YEAR. THE CLEVELAND CLINIC BRINGS IN  
3 90 MILLION DOLLARS A YEAR, CITY HOPE HERE BRINGS IN 85 MILLION  
4 DOLLARS A YEAR. OUR OWN CHILDREN'S HOSPITAL BRINGS IN --

5

6 **SUP. YAROSLAVSKY:** THESE ARE PRIVATE CHARITABLE DONATIONS NOT  
7 GOVERNMENT RESEARCH.

8

9 **JACK SHAIKLEY:** THESE ARE PRIVATE CHARITABLE DONATIONS, THEY  
10 ARE NOT FEDERAL GRANTS, THEY ARE NOT RESEARCH GRANTS OF ANY  
11 KIND. I BELIEVE IN FIVE YEARS, RANCHO LOS AMIGOS COULD BE  
12 BRINGING IN BETWEEN 25 AND 50-MILLION-DOLLARS A YEAR FROM THE  
13 PRIVATE SECTOR, WHICH WOULD MORE THAN COVER THE COST, THE  
14 DIFFERENCE BETWEEN BREAKING EVEN AND LOSING.

15

16 **SUP. YAROSLAVSKY:** YEAH SO.

17

18 **JACK SHAIKLEY:** 60 DAYS.

19

20 **SUP. YAROSLAVSKY:** SO WITHIN 60 DAYS, YOU THINK YOU WOULD HAVE  
21 -- YOU'D BE ABLE TO TAKE THE TEMPERATURE ON WHETHER IT'S  
22 DOABLE OR NOT. ONE WAY OR THE OTHER, YOU'D KNOW.

23

24 **JACK SHAIKLEY:** I BELIEVE SO, SIR.

25



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1    **SUP. YAROSLAVSKY:** ALL RIGHT, AND -- OKAY. THANK YOU. THAT'S  
2    ALL.

3

4    **SUP. BURKE, CHAIR:** AREN'T THERE REVENUES THAT WOULD BE  
5    AVAILABLE TO RANCHO IF IT WAS ORGANIZED AS A NONPROFIT OR WHAT  
6    WE CALL COMMUNITY HOSPITAL? ARE THERE ADDITIONAL REVENUES THAT  
7    THEY WOULD BE ABLE TO GENERATE, NOT JUST FOUNDATION AND  
8    DONATIONS, BUT AREN'T THERE ALSO PRIVATE PATIENTS THAT THEY  
9    MIGHT BE ABLE TO GET AS WELL AS SOME OF THE CONTRACTS WITH  
10   H.M.O.s?

11

12   **HARRIETT GILL:** ABSOLUTELY, AND THOSE ARE NOT AVAILABLE TO  
13   RANCHO RIGHT NOW.

14

15   **SUP. BURKE, CHAIR:** THEY ARE NOT AVAILABLE. DO YOU HAVE ANY  
16   ESTIMATE OF HOW MUCH MONEY THAT WOULD PROBABLY ENTAIL?

17

18   **HARRIETT GILL:** THAT'S DIFFICULT TO SAY AT THIS POINT. I THINK  
19   THAT, YOU KNOW, THE REVENUE THAT RANCHO IS CURRENTLY GETTING  
20   FROM Medi-Cal IS ALSO A SIGNIFICANT PORTION TOWARD ITS  
21   OPERATING FUNDS. WE WOULD STILL HAVE TO DO A BUSINESS PLAN TO  
22   LOOK AT EXACTLY WHAT PERCENTAGE OF COMMERCIAL PAYER THAT WOULD  
23   BE THERE, BUT WE WOULD ANTICIPATE IT WOULD BE SIGNIFICANT.

24



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1   **SUP. BURKE, CHAIR:** AND ALSO THE CONTRACTS THAT MIGHT NOT BE IN  
2   EXISTENCE AT PRESENT, WITH SOME OF THE H.M.O.s, IF WE COULD  
3   GET SOME ESTIMATE OF THOSE CONTRACTS AND THE NUMBER OF PEOPLE  
4   WHO WOULD QUALIFY UNDER THOSE AS WELL AS OBVIOUSLY THE PRIVATE  
5   PAYERS AND OBVIOUSLY THERE'S ALSO THE FOUNDATION AND GRANT  
6   FUNDS. THEY DO GET SIGNIFICANT GRANTS NOW, DON'T THEY?

7

8   **HARRIETT GILL:** THOSE ARE RESEARCH FUNDS.

9

10   **SUP. BURKE, CHAIR:** RESEARCH FUNDS, THEY DO GET THOSE.

11

12   **JACK SHAIKLEY:** YES AND THEY SHOULD CONTINUE TO GET THOSE.

13

14   **HARRIETT GILL:** YES CONTINUE TO DO THAT AND POTENTIALLY MORE.

15

16   **SUP. BURKE, CHAIR:** WELL I DO THINK IT'S VERY IMPORTANT FOR US  
17   TO GET SOME INDICATION OF THE POTENTIAL REVENUE. I JUST HAVE  
18   ONE OTHER ISSUE, AND THAT IS THE STATE S.S.I., IF YOU'RE ON  
19   S.S.I., YOU'RE ENTITLED TO MEDICAID. IS THAT AVAILABLE NOW IN  
20   THE MAGNITUDE THAT WE COULD ANTICIPATE UNDER THE PRESENT  
21   SITUATION? DO WE -- WE ALREADY GET THAT, DON'T WE?

22

23   **HARRIETT GILL:** RIGHT, YOU DO, YOU DO.

24





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1   **SUP. BURKE, CHAIR:** THERE WOULD BE PEOPLE WHO HAVE BEEN GOING  
2   FOR LONG TERM, BECAUSE I GET THE IMPRESSION THAT MANY PEOPLE  
3   HAVE BEEN GOING FOR 15, 16 YEARS. THEY'RE NOW EMPLOYED. I  
4   SUSPECT THEY HAVE EMPLOYMENT THAT THEY RECEIVE PRIVATE  
5   INSURANCE, BUT SOME OF THEM, AREN'T THEY STILL ENTITLED TO GET  
6   SOME KIND OF S.S.I. OR MEDICAL COVERAGE UNDER THE STATE  
7   REHABILITATION PROGRAM?

8

9   **HARRIETT GILL:** IT'S EITHER S.S.I. OR FOR INDIVIDUALS WHO'VE  
10  WORKED OVER TWO YEARS AND THEN BECOME DISABLED, THEY'RE  
11  ACTUALLY ELIGIBLE FOR MEDICARE.

12

13  **SUP. BURKE, CHAIR:** DO YOU KNOW ABOUT HOW MUCH MEDICARE RANCHO  
14  IS GETTING?

15

16  **HARRIETT GILL:** RIGHT NOW IT'S 10%.

17

18  **SUP. BURKE, CHAIR:** I SEE AND THE EXPECTATION, I UNDERSTAND  
19  THAT THEY HAVE OF US IS SOMEWHERE BETWEEN 12 AND 18, NOT IN  
20  RANCHO, BUT IN OUR OTHER HOSPITALS. SO IT WOULD BE VERY  
21  INTERESTING TO SEE WHAT NUMBER THERE.

22

23  **HARRIETT GILL:** YEAH, THAT WOULD ALL HAVE TO BE IN ESSENTIALLY  
24  THE SECOND PHASE OF OUR STUDY WHICH WOULD BE FOR OUR BUSINESS  
25  PLAN.



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1

2 **SUP. BURKE, CHAIR:** YEAH ALL RIGHT, I THINK THIS IS VERY  
3 IMPORTANT THAT WE GET THIS INFORMATION.

4

5 **HARRIETT GILL:** YES.

6

7 **SUP. BURKE, CHAIR:** MR. YAROSLAVSKY AND THEN MR. KNABE.

8

9 **SUP. YAROSLAVSKY:** YEAH, I HAD JUST ONE FOLLOW-UP THAT I WAS  
10 GOING TO ASK YOU. THERE ARE REALLY TWO ISSUES. ONE IS THE  
11 ASSESSMENT OF WHETHER THERE'S A LONG-TERM COMMITMENT FROM THE  
12 CHARITABLE COMMUNITY. THAT'S ONE THING. IF YOU DETERMINE THAT  
13 THERE IS AND YOU'VE OFFERED TO DO THAT, AT LEAST YOU DID TO ME  
14 YESTERDAY, IF YOU DETERMINED THERE IS, THEN THERE'S THE ISSUE  
15 OF IMMEDIATE SHORT TERM TRANSITIONAL OBLIGATIONS, WHICH WE  
16 AREN'T GOING TO BE ABLE TO COVER, AND WHICH WE WOULD NEED THE  
17 CHARITABLE COMMUNITY TO DO AS WELL. DO YOU BELIEVE -- COULD  
18 YOU GIVE ME AN ASSESSMENT ON -- 60 DAYS, I ASSUME, WAS A  
19 ASSESSMENT OF LONG TERM, OR IS THAT AN ASSESSMENT OF THE  
20 TRANSITIONAL ISSUE, OR IS IT BOTH?

21

22 **JACK SHAIKLEY:** TO BE HONEST WITH YOU, MY CRYSTAL BALL GETS  
23 VERY FUZZY FOR THE SHORT TERM. I CAN SEE QUITE CLEARLY FIVE  
24 YEARS FROM NOW BUT I CAN'T SEE VERY CLEARLY SIX MONTHS FROM  
25 NOW. I THINK THAT THIS NONPROFIT ORGANIZATION WOULD WANT TO



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1 ENTER INTO NEGOTIATIONS WITH THE COUNTY TO PROVIDE -- TO  
2 ACTUALLY RUN AND MANAGE RANCHO FOR A YEAR OR TWO BEFORE IT IS  
3 ACTUALLY TRANSITIONED INTO AND FOLDED INTO THE NEW ENTITY.  
4 RANCHO HAS A VALUE, AND THAT VALUE NEEDS TO BE DETERMINED IF  
5 IT IS TO BE GIVEN SO --

6

7 **SUP. YAROSLAVSKY:** BUT --

8

9 **JACK SHAIKLEY:** BUT IN THE SHORT-TERM, JANUARY 1st WE OUGHT TO  
10 BE ABLE TO ENTER INTO NEGOTIATIONS WITH THE COUNTY --

11

12 **SUP. YAROSLAVSKY:** BUT HERE'S THE PROBLEM. I WOULD WANT TO KNOW  
13 -- I MEAN I THINK WE ALL KNOW WHAT THE DILEMMA WE'RE FACING  
14 IS, AND IT'S A -- I'M NOT GIVING SPEECHES HERE, BUT WE ALL  
15 KNOW WHAT THE DILEMMA IS. IF WE -- IF THE DECISION OF THE  
16 BOARD TODAY WOULD BE TO CLOSE, IF THAT'S WHAT IT WAS, BUT IN  
17 THE NEXT 30 TO 60 DAYS YOU CAME BACK AND YOU CAME TO THE  
18 HEALTH DIRECTOR, TO THE BOARD AND SAID YOU HAVE THE FOLLOWING  
19 COMMITMENTS AND THE COMMITMENTS THAT I'D BE LOOKING FOR IN THE  
20 SHORT-TERM WOULD BE NOT THE PROMISE THAT IN FIVE YEARS THERE'S  
21 GOING TO BE A NONPROFIT, BECAUSE WE'VE BEEN PROMISED -- BOY, I  
22 TELL YA, WE'VE BEEN PROMISED ALL KINDS OF STUFF ESPECIALLY AS  
23 IT RELATES TO RANCHO, AND NONE OF IT EVER PANS OUT. BUT IF YOU  
24 WERE TO -- IF THE CHARITABLE COMMUNITY -- THE SAME CHARITABLE  
25 COMMUNITY TO WHOM YOU WOULD TURN TO DO THE LONG-TERM FIX, THE



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1 NONPROFIT PIECE, WOULD STEP IN TO PROVIDE THE TRANSITIONAL  
2 FUNDING, WHATEVER THAT AMOUNT OF TIME IS TO DO THE ONE-YEAR,  
3 TO TRANSITION IT OVER SO THAT THE COUNTY IS NOT OBLIGATED FOR  
4 THAT COST WHICH COULD BE 30, 40, \$50 MILLION A YEAR, DEPENDS  
5 ON WHAT NUMBERS YOU BELIEVE, THAT WOULD -- AND THAT'S THE  
6 QUESTION I'M ASKING YOU. DO YOU THINK THAT IN THE NEXT 30 TO  
7 60 DAYS, AS YOU'RE CALLING A FOUNDATION, SPELL OUT THERE'S A  
8 SHORT-TERM AND A LONG-TERM ISSUE, CAN WE GET A COMMITMENT FROM  
9 "X" NUMBER OF FOUNDATIONS FOR TWO YEARS OF FUNDING FOR  
10 TRANSITIONAL AND THEN WE DISCUSS THE REST OF IT -- YOU COULD  
11 DISCUSS THE REST OF IT IN LONGER TERMS?

12

13 **JACK SHAIKLEY:** I'M GOING TO HAVE TO GIVE YOU AN "I DON'T KNOW"  
14 ON THAT. MANY FOUNDATIONS ARE GLACIAL IN THEIR DECISION-MAKING  
15 PROCESS, AND I REALLY DON'T KNOW. AND THAT'S WHAT KEEPS ME UP  
16 AT NIGHT. I BELIEVE FIRMLY THAT THIS IS THE BEST OPTION, BUT I  
17 REALLY DON'T KNOW WHAT CAN HAPPEN BETWEEN TODAY AND DECEMBER  
18 31st OF 2003.

19

20 **SUP. YAROSLAVSKY:** WELL I APPRECIATE THAT, AND IT'S AN UNFAIR  
21 QUESTION, IN A WAY.

22

23 **JACK SHAIKLEY:** NO, IT'S A FINE QUESTION. YOU SHOULD HAVE THAT  
24 ANSWER.

25



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1   **SUP. YAROSLAVSKY:** AND I WANT TO THANK YOU, JACK. WHEN I WAS  
2   STILL SITTING IN THE CHAIR, YOU CALLED AND YOU OFFERED TO TAKE  
3   A LOOK AT THIS AND I APPRECIATE IT. YOU WEREN'T ASKED TO DO  
4   IT, YOU VOLUNTEERED TO DO IT, AND IT'S BEEN THOUGHT PROVOKING  
5   AND IT'S CERTAINLY GIVEN US A LOT OF FOOD FOR THOUGHT AND I  
6   WANT TO THANK YOU AND YOUR TEAM AND THE CONSULTANT FOR THE  
7   WORK THEY'VE DONE.

8

9   **JACK SHAIKLEY:** THANK YOU VERY MUCH.

10

11   **SUP. BURKE, CHAIR:** MR. KNABE.

12

13   **SUP. KNABE:** MADAM CHAIR JUST TO FOLLOW UP ON THAT QUESTION,  
14   THAT WAS A QUESTION I WAS GOING TO ASK. AS IT RELATES TO THIS  
15   TRANSITION PERIOD, THIS SHORT-TERM WHERE YOUR ALL IS RATHER  
16   CLOUDY VERSUS LONG-TERM, YOU ALSO WERE VERY ADAMANT WITHIN THE  
17   CONFINES OF THE REPORTS TALKING ABOUT THE VALUE OF RANCHO, THE  
18   FACT THAT IT'S IN ONE OF THE TOP 10 REHAB HOSPITALS IN AMERICA  
19   CONSISTENTLY AND ALL OF THE OTHER RESEARCH AND EVERYTHING ELSE  
20   AND THE RECOVERY OF ITS PATIENTS AND BACK TO NORMAL LIFE AND,  
21   YOU KNOW, JUST ALL KINDS OF GOOD THINGS. IN THE SHORT-TERM, IF  
22   YOU WERE TO LOOK ON THIS NEXT 60 DAYS, TO PUT A PACKAGE  
23   TOGETHER TO KEEP RANCHO OPEN, BOTH SHORT-TERM AND LONG-TERM AS  
24   A NOT-FOR-PROFIT, WOULDN'T IT HAVE MORE VALUE IN YOUR  
25   NEGOTIATIONS IN THE NEXT 60 DAYS IF CLOSURE WERE OFF THE



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1 TABLE? IN OTHER WORDS, THERE'S TWO OPTIONS HERE, AS MR.  
2 YAROSLAVSKY MENTIONED. ONE IS TO GO PERCEIVE ON A VOTE FOR  
3 CLOSURE, AND THEN WITHIN THE NEXT 60 DAYS, YOU REPORT BACK. TO  
4 ME, THAT WOULD IMPACT THE VALUE. TO ME, THAT YOU'D WANT TO  
5 MOVE FORWARD ON, YOU KNOW, ALLOWING YOU SOME PERIOD OF TIME TO  
6 FIND THAT OUT WITHOUT CLOSURE, BECAUSE TO ME BY MOVING  
7 FORWARD, YOU TAKE THE CHANCE OF LOSING THE DOCTORS AND NURSES  
8 AND EVERYTHING ELSE THAT MAKES IT GO. SO IS THERE SOME VALUE  
9 TO KEEPING IT AT LEAST MOVING FORWARD AS IT RELATES TO THIS  
10 NEXT SHORT-TERM PERIOD?

11

12 **JACK SHAIKLEY:** THAT'S ENTIRELY YOUR DECISION, BUT I WOULD FEAR  
13 THAT THE DOCTORS AND CLINICIANS WHO FORM THE REAL HEART AND  
14 SOUL OF RANCHO, IF IT WERE TO BE CLOSED, MIGHT DISAPPEAR LIKE  
15 MERCURY IN YOUR HAND AFTER YOU SLAP IT, AND I THINK WE DON'T  
16 WANT TO LOSE THAT.

17

18 **SUP. KNABE:** OKAY. THANK YOU.

19

20 **SUP. BURKE, CHAIR:** I WOULD HAVE JUST ONE MORE QUESTION. I KNOW  
21 THAT -- IS THE PERSON STILL HERE FROM FIREBAUGH'S OFFICE?  
22 BECAUSE MY QUESTION IS ALSO, A LOT OF THE TESTIMONY WAS AS FAR  
23 AS ATHLETIC PROGRAMS AND OTHER REHABILITATION PROGRAMS THAT  
24 WERE SEPARATE AND APART FROM THE MEDICAL. THEY WERE TOTALLY  
25 REHABILITATION, WHICH A LOT OF THAT I KNOW IS FUNDED THROUGH



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1 THE STATE, AND WILL YOU BE LOOKING AT THAT? AND I WOULD HOPE  
2 THAT OUR LEGISLATORS WOULD LOOK AT THAT ALSO, THAT A LOT OF  
3 THE TESTIMONY WE HEARD TODAY, ATHLETIC PROGRAMS, PROGRAMS IN  
4 TERMS OF LIVING ENVIRONMENT, INDEPENDENT LIVING, A LOT OF  
5 THOSE ARE STATE REHABILITATION KINDS OF PROGRAMS THAT ARE  
6 PROVIDED THROUGH THE STATE, AND I HOPE THAT WE CAN HAVE SOME  
7 COMMUNICATION AND THAT PART OF YOUR STUDY IDENTIFIES THE STATE  
8 FUNDS THAT MIGHT VERY WELL BE AVAILABLE. I DON'T KNOW WHETHER  
9 RANCHO GETS THEM NOW OR NOT, BUT CERTAINLY, ATHLETIC TEAMS,  
10 USE OF FACILITIES AND ALL OF THOSE THINGS ARE VERY LEGITIMATE  
11 REHABILITATION PROGRAMS, AND I KNOW I COULD GO TO PROGRAMS  
12 WHERE THERE ARE REHABILITATION PROGRAMS THAT DO PROVIDE THOSE  
13 KINDS OF SERVICES. NOW, RANCHO PROVIDES THEM IN A DIFFERENT  
14 CONTEXT AND PROVIDES THEM AS PART OF THE HEALING, AND I WOULD  
15 THINK THAT WE NEED TO ALSO IDENTIFY WHAT STATE FUNDS ARE  
16 AVAILABLE THAT CAN BE UTILIZED IN THAT CONTEXT.

17  
18 **SUP. KNABE:** WELL I THINK IN THE ATHLETIC PROGRAMS THOUGH IF  
19 I'M CORRECT, THAT WE COULD ASK SOMEBODY FROM RANCHO, BUT AT  
20 LEAST THE ATHLETIC PROGRAMS AT RANCHO, THEY'RE FUNDED  
21 COMPLETELY BY LOS FORESTIS, AND THERE'S NO GOVERNMENT MONEY  
22 INVOLVED WITH THOSE ATHLETIC -- [ Applause ].

23  
24 **SUP. KNABE:** THEY'RE A FUNDRAISING ARM SEPARATE FROM THE --





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1    **SUP. BURKE, CHAIR:** THEY'RE A FUNDRAISING ARM, OKAY.

2

3    **SUP. KNABE:** A FUNDRAISING ARM, BUT THEY FUND THE ATHLETIC  
4    PROGRAMS AT RANCHO. THIS IS VERY -- SO THAT YEAH.

5

6    **SUP. BURKE, CHAIR:** SO THEY'D BE GOING AWAY.

7

8    **SUP. KNABE:** OH, NO, THEY, I MEAN --

9

10   **Audience:** [ Inaudible ]

11

12   **SUP. BURKE, CHAIR:** PRIVATE DONOR. OKAY.

13

14   **Audience:** [ Inaudible ]

15

16   **SUP. KNABE:** BEAUTIFUL HATS.

17

18   **Audience:** [ Inaudible ]

19

20   **SUP. BURKE, CHAIR:** RIGHT, OKAY. RIGHT. WELL, THAT'S -- [   
21   Enthusiastic Cheers and Applause ]

22

23   **SUP. BURKE, CHAIR:** WE WANT TO THANK THEM. AND THAT OBVIOUSLY  
24   THE TESTIMONY IS VERY STRONG IN FAVOR OF WHAT YOU'RE DOING, SO  
25   YOU SHOULD BE VERY PLEASED WITH THAT. ALL RIGHT.



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1

2 **SUP. KNABE:** THANK YOU VERY MUCH.

3

4 **SUP. BURKE, CHAIR:** THANK YOU, ALL RIGHT NOW WE'RE GOING TO  
5 CALL SOME OF THE OTHER PHYSICIANS WHO'VE BEEN SO DILIGENT IN  
6 STAYING. DR. IRENE GILLCOUGH, DR. BRIAN CAMP, SILVA SHAW.  
7 WOULD YOU PLEASE COME FORWARD? I'M TRYING TO CALL THOSE THAT I  
8 HAD ON THE LIST FIRST.

9

10 **DR. SYLVIA SHAW:** GOOD AFTERNOON, MADAM CHAIRMAN, BOARD OF  
11 SUPERVISORS. MY NAME IS DR. SYLVIA SHAW. I AM REPRESENTING THE  
12 ORTHODIABETES SERVICES AT RANCHO LOS AMIGOS, WHICH IS A --  
13 CONSIDERED A CENTER OF EXCELLENCE AT RANCHO. 17 MILLION  
14 AMERICANS HAVE DIABETES MELLITUS AND THE NUMBER IS INCREASING.  
15 THE MORBIDITY FOR LOSS OF LIMB, FIVE-YEAR MORBIDITY FOR  
16 DIABETES LOSS OF LIMB IS 60% THAT THE PATIENT WILL HAVE, AFTER  
17 ONE AMPUTATION, THEY'LL HAVE AN AMPUTATION ON THE OTHER SIDE.  
18 DIABETES IS A VASCULAR DISEASE AND THE VESSELS THAT SUPPORT  
19 THE NERVES THAT REACH THE FEET ARE OFTEN COMPROMISED, LEAVING  
20 THE PATIENT WITH THE INABILITY TO FEEL WHERE THEY'RE PLACING  
21 THEIR FEET OR THAT THEY HAVE NAILS IN THEIR SHOES. THEY WALK  
22 ON SHOES THAT ARE TOO TIGHT, OR BUY NEW SHOES, GO TO DANCE AND  
23 THEY WEAR HOLES IN THEIR FEET, ULCERS, THE ULCERS BECOME  
24 INFECTED, THE INFECTION REACHES THE BONE, THEY SHOW UP TO THE  
25 COUNTY E.R. THE E.R.s ARE ALREADY OVERCROWDED. THESE PATIENTS



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1 GET ADMITTED AND PLACED ON ANTIBIOTICS, THEY MAY NEED SURGERY  
2 BUT THEY ARE CONSTANTLY -- THE SURGERY DATES ARE CONSTANTLY  
3 BUMPED BECAUSE OF LACK OF SPACE IN THE O.R. OUR PATIENT  
4 PROFILE IS LIKE TAKE A 60-YEAR-OLD PERSON WHO IS VISITING FROM  
5 CHINA OR JUST CROSSED THE BORDER FROM MEXICO OR SOMEONE WHO IS  
6 JUST PASSING THROUGH CALIFORNIA OR FROM IDAHO OR RESIDENTS OF  
7 L.A. COUNTY, IT HAPPENS TO ANYONE AND EVERYBODY WHO MAY HAVE  
8 DIABETES, WHETHER THEY KNOW IT OR NOT AND THEY WIND UP WITH  
9 THIS FOOT INFECTION. IN STEPS RANCHO. WE HAVE THE NURSES WHO  
10 ARE OUT RECRUITING THE PATIENTS FROM THE VARIOUS HOSPITALS. WE  
11 ADMIT THEM TO -- WE TAKE ADMISSIONS FROM OLIVE VIEW, HIGH  
12 DESERT, MARTIN LUTHER KING, HARBOR GENERAL, PRIVATE HOSPITALS  
13 WHO WIND UP WITH PATIENTS WHO HAVE NO INSURANCE, AND 45% OF  
14 OUR POPULATION ON THE ORTHODIABETES SERVICE COMES FROM  
15 L.A.C./U.S.C. LAST YEAR WE ADMITTED OVER 2,400 PATIENTS TO OUR  
16 SERVICE. WE EMBRACE THESE PATIENTS WHEN THEY'RE TRANSFERRED TO  
17 OUR FACILITY. WE HAVE A MULTI-DISCIPLINARY TEAM THAT SERVICES  
18 THEM CONSISTING OF ORTHOPEDIC SURGEON, THREE BOARD CERTIFIED  
19 ENDOCRINOLOGISTS WHO SERVE AS PRIMARY PHYSICIANS, DIABETES,  
20 NURSE EDUCATOR, THE NURSES, PHARMACISTS, THE BILINGUAL  
21 PSYCHOLOGISTS. WE HAVE THE REHAB TEAM CONSISTING OF THE  
22 PHYSICAL THERAPIST AND THE ORTHOTIST AND THE PERSON WHO  
23 PROVIDES LEGS AND SHOES, DIETICIANS. WE HAVE THIS MULTI-  
24 DISCIPLINARY TEAM THAT MEETS ONCE WEEKLY OVER THE PATIENTS  
25 THAT ARE ON OUR SERVICE, DOES NOT EXIST IN THE COUNTY SYSTEM



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1 TO SERVICE THE DIABETIC WITH FOOT PROBLEMS. IT IS OUR HOPE  
2 THAT THIS ORTHODIABETES CENTER OF EXCELLENCE CONTINUES ON TO  
3 SERVICE THE PEOPLE OF THE COUNTY OF LOS ANGELES. WE HAVE THE  
4 MISSION TO MANAGE THE CHRONIC COMPLICATIONS OF DIABETES,  
5 ESPECIALLY THAT OF THE DIABETIC FOOT AND THE DIABETIC  
6 REQUIRING AMPUTATION. WE WANT TO PREVENT FURTHER AMPUTATIONS  
7 BY EDUCATION AND ANY FURTHER LIMB LOSS AND WE WANT TO REHAB  
8 THE PATIENT PHYSICALLY AND MENTALLY FOR RETURN TO THE  
9 COMMUNITY.

10

11 **SUP. BURKE, CHAIR:** DR. SHAW, THANK YOU VERY MUCH. ALL RIGHT.  
12 DR. GILGOTT.

13

14 **DR. IRENE GILGOTT:** I'M DR. IRENE GILGOTT. I'M CHAIRPERSON OF THE  
15 DEPARTMENT OF PEDIATRICS AND I'D LIKE TO THANK THE BOARD FOR  
16 GIVING ME THE OPPORTUNITY TO SPEAK TO YOU TODAY. I'M HERE TO  
17 EXPRESS MY CONCERN FOR THE CHILDREN OF RANCHO SHERIDAN BE  
18 CLOSED. OUR CHILDREN, JUST LIKE THE ADULTS, COME TO US WITH  
19 SEVERE BRAIN INJURY AND SPINAL CORD INJURY AND THEY ARE ALSO  
20 VENTILATOR DEPENDENT BUT WE ALSO SERVE THE CHILDREN THAT HAVE  
21 MUSCULAR DYSTROPHY. THE CHILDREN REPRESENTED 4,126 IN-PATIENT  
22 DAYS AND 897 OUTPATIENT VISITS LAST YEAR. WE ARE THE ONLY  
23 COMPREHENSIVE CLINIC IN ALL OF LOS ANGELES COUNTY FOR ALL  
24 CHILDREN WITH MUSCULAR DYSTROPHY, AND WE ARE THE ONLY FACILITY  
25 IN LOS ANGELES COUNTY TO TAKE VENTILATOR-DEPENDENT CHILDREN



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1 INTO OUR IN-PATIENT FACILITY. THERE IS NO OTHER CENTER THAT  
2 WILL ACCEPT THESE CHILDREN. I PRESENTLY FOLLOW ABOUT 100  
3 VENTILATOR-DEPENDENT CHILDREN THAT ARE OUT PATIENTS AND THREE  
4 THAT ARE INPATIENTS. IF RANCHO WERE TO CLOSE, THERE IS  
5 ABSOLUTELY NO OTHER PLACE FOR THEM TO GO AND AS THE PHYSICIANS  
6 FROM L.A.C/U.S.C. CLEARLY TOLD YOU, THEY WILL BACK UP INTO THE  
7 PEDIATRIC INTENSIVE CARE UNITS, WHICH IN THE COUNTY, THERE ARE  
8 VERY FEW PEDIATRIC INTENSIVE CARE UNIT BEDS. THEY WOULD FILL  
9 THOSE BEDS AND THERE WOULD BE NO PLACE FOR NEW PATIENTS TO  
10 COME. THE DAY THAT RANCHO CLOSURES WILL MARK THE BEGINNING OF A  
11 MAJOR DECREASE IN QUALITY OF CARE FOR THESE CHILDREN. ADVANCES  
12 IN CARE ARE ONLY POSSIBLE WHEN EXPERTISE IS ALLOWED TO  
13 FLOURISH AS THE GILL BASANO REPORT STATED. THIS IS WHY THERE  
14 ARE CANCER CENTERS AND H.I.V. CENTERS. RANCHO IS THAT CARE  
15 CENTER FOR DISABLED CHILDREN AND DISABLED ADULTS. AS I BROUGHT  
16 UP, AS I WAS STANDING THERE, WE ALREADY HAVE ATTRACTED PRIVATE  
17 DONORS. LOS FORESTIS HAS BEEN WITH US FOR MANY, MANY YEARS,  
18 THEY ARE EXTREMELY DEVOTED, THEY'RE A SMALL GROUP AND RAISE AN  
19 ENORMOUS AMOUNT OF FUNDS FOR RANCHO, WHICH NOT ONLY BENEFITS  
20 THE CHILDREN, BUT BENEFITS ALL PATIENTS AS THE CHILDREN GROW  
21 UP TO BECOME ADULTS. THEY COMPLETELY SUPPORT OUR WHEELCHAIR  
22 SPORTS PROGRAM. NOT A SINGLE COUNTY DOLLAR HAS EVER GONE TO  
23 OUR WHEELCHAIR SPORTS PROGRAM, AND OUR WHEELCHAIR SPORTS  
24 PROGRAM IS WORLD KNOWN AT THIS TIME. RANCHO'S SUCCESS LIES IN  
25 THE BELIEF IN THE POTENTIAL OF EACH OF OUR PATIENTS. IF RANCHO



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1 CLOSSES, ALL OF US WILL LOSE A BELIEF IN THE HUMAN SPIRIT  
2 RARELY SEEN IN OUR MODERN SOCIETY. I HOPE EACH OF YOU WILL  
3 CONSIDER CAREFULLY WHAT THE FUTURE OF RANCHO WILL BE AND THE  
4 MESSAGE THAT YOUR VOTE WILL SEND TO THE DISABLED COMMUNITY AS  
5 A WHOLE. THANK YOU FOR THIS OPPORTUNITY. [ Enthusiastic Cheers  
6 and Applause ]

7

8 **SUP. BURKE, CHAIR:** DR. RUNYON. BUT LET ME SEE. IS DR. KAHN  
9 HERE? AND DR. GOODHOE. THEY WERE ON THE LIST. YES. WOULD YOU  
10 LIKE TO COME UP? I'M SORRY. I PASSED OVER YOU. AND DR.  
11 RESNICK. YES, DR. KEMP?

12

13 **DR. BRIAN KEMP:** YES, I'M DR. BRIAN KEMP, I'M THE DIRECTOR OF  
14 THE AGING PROGRAMS AT RANCHO LOS AMIGOS. I'VE BEEN AT RANCHO  
15 FOR APPROXIMATELY 36 YEARS, FORMERLY AS A COUNTY EMPLOYEE AND  
16 NOW RETIRED FROM THE COUNTY BUT WORKING AT RANCHO FULL TIME  
17 AND DIRECTING RESEARCH AND OTHER ACTIVITIES AT RANCHO.  
18 OBVIOUSLY THERE ARE BIG ISSUES WITH OUR GERIATRIC POPULATION  
19 AND RANCHO HAS ONE OF THE GERIATRIC REHABILITATION PROGRAMS IN  
20 THE SOUTH LAND, BUT ANOTHER AGING ISSUE WE HAVE AS WELL IS THE  
21 EFFECT OF AGING ON PEOPLE WITH DISABILITIES, AND WE'VE LEARNED  
22 THROUGH OUR RESEARCH CENTERS THAT AS PEOPLE AGE WITH A  
23 DISABILITY TOWARDS MIDDLE AGE, THEY MAY BEGIN TO DEVELOP  
24 MULTIPLE NEW HEALTH PROBLEMS AND FUNCTIONAL PROBLEMS THAT I  
25 THINK YOU'VE HEARD A BIT ABOUT TODAY. SO THERE'S A GREAT NEED



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1 NOT ONLY FOR NOW, BUT IN THE FUTURE. AND I BELIEVE THE VALUE  
2 OF RANCHO IS NOT ONLY IN ITS SERVICE IT PROVIDES, BUT IN ITS  
3 INTELLECTUAL, IT'S SPIRITUAL, AND ITS HUMANISTIC RESOURCES AS  
4 WELL. THERE ARE REASONS WHY ALL OF US CAME TOGETHER AT RANCHO,  
5 AND I THINK WHAT WE ARE ABLE TO DO AND WHAT WE'RE ABLE TO  
6 PROVIDE IS A PRODUCT OF THAT EFFORT ALTOGETHER. I KNOW MYSELF,  
7 I'VE BEEN RESPONSIBLE FOR BRINGING MILLIONS OF DOLLARS TO  
8 RANCHO IN TERMS OF RESEARCH DOLLARS. WHERE WOULD THAT GO? WHAT  
9 WOULD BECOME OF THE EFFORTS OF PEOPLE TO PROMOTE THIS MISSION.  
10 I WAS TRYING TO THINK OF AN ANALOGY OF CLOSING RANCHO WITHOUT  
11 GIVING IT REALLY A GOOD EFFORT AND TRYING TO TAKE IT TO A  
12 DIFFERENT MODE, SUCH AS A PRIVATE NONPROFIT. AND THE THING  
13 THAT COMES MOST TO MIND TO ME IS THE BURNING OF THE LIBRARY AT  
14 ALEXANDRIA. WE DON'T WANT TO LOSE ALL THE INTELLECTUAL  
15 HUMANISTIC SERVICE AND SPIRITUAL THINGS THAT WE BROUGHT  
16 TOGETHER FOR DECADES, LITERALLY DECADES, BY A SHORTSIGHTED  
17 ATTEMPT TO SOLVE AN ECONOMIC PROBLEM AND THEREFORE TURN AN  
18 ECONOMIC PROBLEM INTO ALSO TO A MORALISTIC AND HUMANISTIC  
19 PROBLEM. THANK YOU.

20  
21 **SUP. BURKE, CHAIR:** THANK YOU. [ Applause ].

22  
23 **SUP. BURKE, CHAIR:** WOULD DR. DEVORD AND DR. CHOU, PAULINA CHOU  
24 COME FORWARD?





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1 **DR. BRUCE RUNYON:** YES I'M DR. BRUCE RUNYON, CHIEF OF THE LIVER  
2 UNIT AT RANCHO AND I HAVE A DECLARATION FOR CONSIDERATION BY  
3 THE BOARD. UP TO 20% OF THE INPATIENTS AT RANCHO ARE PATIENTS  
4 SPECIFICALLY TRANSFERRED TO US BECAUSE THEY HAVE LIVER  
5 DISEASE. IN 1958, THE FOUNDING FATHERS OF OUR LIVER UNIT  
6 DETERMINED THAT PATIENTS WITH LIVER DISEASE NEED THE CARE OF  
7 PHYSICIANS AND NURSES WITH SPECIFIC TRAINING IN LIVER DISEASE  
8 AND A SYSTEM WAS DEVELOPED IN THE COUNTY TO TRANSFER PATIENTS  
9 WITH LIVER DISEASE FROM COUNTY HOSPITALS TO OUR LIVER UNIT.  
10 OUR LIVER UNIT MOVED FROM JOHN WESLEY HOSPITAL TO RANCHO IN  
11 1976, AND THIS UNIT HAS BEEN L.A. COUNTY'S CENTER OF  
12 EXCELLENCE FOR CARE OF PATIENTS WITH CIRRHOSIS AND HEPATITIS  
13 FOR 45 YEARS. THIS UNIT HAS PROVIDED COST EFFECTIVE, STATE OF  
14 THE ART CARE FOR MANY THOUSANDS OF THE UNDERSERVED AND HAS  
15 TRAINED HUNDREDS OF PHYSICIANS, MEDICAL STUDENTS, AND NURSING  
16 STUDENTS. THE CURRENT PRESIDENT OF THE MOST PRESTIGIOUS  
17 AMERICAN MEDICAL SOCIETY FOR THE LIVER IS A RANCHO LIVER  
18 SUBSPECIALTY GRADUATE. THE MOST PROLIFIC AUTHOR OF LIVER  
19 RESEARCH IN THE WORLD IN THE 1980s IS OUR SENIOR FOUNDING  
20 FATHER, DR. TELFORD REYNOLDS. COUNTLESS LIVES THROUGHOUT THE  
21 WORLD HAVE BEEN SAVED BY PHYSICIANS WHO WERE USING INFORMATION  
22 DEVELOPED OR VALIDATED AT RANCHO. MOST OF OUR PATIENTS ARE  
23 HOSPITALIZED IN A CRISIS SITUATION AND DESPITE THIS, 95%  
24 SURVIVE. MOST LIVER DISEASE IS HABIT RELATED TO ALCOHOL OR  
25 DRUGS, AND NOW WE'RE SEEING OBESITY RELATED LIVER INJURY AS



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1 OUR MOST COMMON CAUSE OF LIVER INJURY AND WE'RE EVEN SEEING  
2 OBESITY CAUSE CIRRHOSIS, AND THIS WILL PROBABLY BECOME OUR  
3 MOST COMMON CAUSE OF CIRRHOSIS. WE ARE AT THE BEGINNING OF  
4 THIS EPIDEMIC, AND LIVER DISEASE IS IN A GROWTH PHASE. WE WILL  
5 BE SEEING MUCH MORE LIVER DISEASE IN THE FUTURE. ONE OF OUR  
6 FACULTY AT RANCHO HAS A SPECIAL INTEREST IN OBESITY RELATED  
7 LIVER INJURY AND IS APPLYING FOR FEDERAL GRANTS RELATIVE TO  
8 THIS PROBLEM. WE HAVE ONGOING CURRENT FEDERAL GRANTS IN  
9 COLLABORATION WITH PSYCHOLOGISTS AT U.S.C. TO MODIFY THE  
10 BEHAVIOR OF OUR PATIENTS TO PREVENT A RECURRENCE OF THEIR  
11 LIVER INJURY. IF RANCHO WERE TO CLOSE, A 45-YEAR TRADITION OF  
12 EXCELLENCE OF PATIENT CARE, TEACHING AND LIFE SAVING RESEARCH  
13 WOULD END. THANK YOU FOR YOUR ATTENTION.

14

15 **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH. AND WE WILL BE CALLING  
16 NEXT DR. MOON AFTER YOU'RE COMPLETE, YES.

17

18 **DR. TERRY DEBOARD:** I'M DR. TERRY DEBOARD, I'M CHAIRMAN OF THE  
19 DEPARTMENT OF DENTISTRY AT RANCHO. RANCHO'S DENTAL CLINIC  
20 PROVIDES APPROXIMATELY 6,000 OUTPATIENT VISITS PER YEAR FOR  
21 ADULTS AND CHILDREN WITH PHYSICAL OR DEVELOPMENTAL  
22 DISABILITIES, CHRONIC MEDICAL CONDITIONS. CHILDREN AND ADULTS  
23 WITH HIGH LEVEL SPINAL CORD INJURY ARE QUADRIPLLEGIC DUE TO  
24 OTHER CAUSES USE THE MUSCLES OF THEIR MOUTH AND TONGUE TO  
25 ACCESS SWITCHES, TO OPERATE COMPUTERS, WHEELCHAIRS, AND TO



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1 COMMUNICATE. ORAL HEALTH IS CRITICAL TO THEIR QUALITY OF LIFE,  
2 AND RANCHO HAS THE SPECIALIZED EQUIPMENT SO THAT THESE PEOPLE  
3 CAN ACCESS DENTAL CARE IN THEIR WHEELCHAIRS OR ON GURNEYS.  
4 CHILDREN AND ADULTS WITH CEREBRAL PALSY, MENTAL RETARDATION OR  
5 OTHER DEVELOPMENTAL DISABILITIES OFTEN CANNOT COOPERATE FOR  
6 ROUTINE IN-HOME ORAL HYGIENE OR DENTAL CARE PROVIDED IN A  
7 CLINIC SETTING. THEIR MEDICAL CONDITION AND SOME OF THE  
8 MEDICATIONS MAKE THEM MORE PRONE TO ORAL DISEASE. RANCHO IS  
9 ABLE TO PROVIDE DENTAL CARE FOR THESE PATIENTS WITH SEDATION  
10 OR GENERAL ANESTHESIA. RANCHO HAS -- RANCHO'S DENTAL CLINIC  
11 HAS SPECIALIZED EQUIPMENT, SERVICES, AND DENTAL PROFESSIONALS  
12 TO SERVE THE NEEDS OF THE PHYSICALLY, DEVELOPMENTALLY DISABLED  
13 PATIENTS OF THE COUNTY. QUALITY ACCESSIBLE DENTAL CARE IS A  
14 SIGNIFICANT HEALTHCARE ISSUE FOR THE PHYSICALLY AND  
15 DEVELOPMENTALLY DISABLED PEOPLE AND IT'S ONE OF THE GREATEST  
16 UNMET NEEDS OF THE COUNTRY. IF RANCHO'S DENTAL CLINIC CLOSES,  
17 THERE WOULD BE A SIGNIFICANT IMPACT TO THE ADULTS AND CHILDREN  
18 WITH DISABILITIES.

19

20 **SUP. BURKE, CHAIR:** THANK YOU, DR. CHOU AND THEN WE WILL CALL  
21 DR. MOON, FOLLOWED BY DR. PERRY AND DR. SAX. DR. CHOU?

22

23 **HELENA CHUI:** I'M HELENA CHUI.

24



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1   **SUP. BURKE, CHAIR:** DR. MOON YOU CAN COME FORWARD AND DR.  
2   PERRY.

3

4   **HELENA CHUI:** I'M THE CHAIR OF NEUROREHAB AT RANCHO AND ALSO  
5   PROFESSOR OF NEUROLOGY AT U.S.C. U.S. NEWS AND WORLD REPORT  
6   RATES RANCHO NINTH AMONG TOP REHAB FACILITIES IN THE COUNTRY.  
7   WE CARE FOR OVER 2,000 INPATIENTS AND 4,000 OUTPATIENTS A  
8   YEAR, BUT DON'T LET US PLAY THE NUMBERS GAME. WE'RE TALKING  
9   ABOUT NOT PEOPLE WITH EPISODIC ILLNESSES BUT PEOPLE WITH  
10   CATASTROPHIC ILLNESSES THAT GO OVER A LIFETIME, SO THOSE  
11   NUMBERS HAVE TO BE MULTIPLIED BY AS YOU HEARD THIS MORNING  
12   FROM TESTIMONY FROM OUR PATIENTS, 10, 20, 30 YEARS. ALTHOUGH  
13   THE ACUTE TRAUMA SYSTEM SAVES LIVES, REHABILITATION MAKES  
14   THOSE LIVES WORTH LIVING. WE KNOW THAT THE COUNTY OF LOS  
15   ANGELES IS FACING VERY DIRE ECONOMIC PROBLEMS, BUT I WOULD  
16   URGE US NOT TO BE DEFEATED BY NUMBERS AND NOT TO BE REDUCED TO  
17   LEGAL MANDATES, AND A NUMBER OF US WOULD SAY DON'T BE TEMPTED  
18   BY THE OPPORTUNITY OF TRANSFERRING AND INDIRECT COST FROM  
19   DISPROPORTIONATE SHARE OF THE LAST UP TO \$35 MILLION. AS THE  
20   GILL BASANO REPORT AND OTHER MARKET ANALYSES SAY, THERE'S NOT  
21   ENOUGH REHAB BEDS IN THE COUNTY OF LOS ANGELES NOW. THE  
22   DEFICIT OF 200 WILL GO TO 300, SO UNLIKE THE DIRECTOR SAID,  
23   PATIENTS FROM THE ACUTE CARE HOSPITALS CAN'T BE SENT TO OTHER  
24   REHAB HOSPITALS. SO THE BUZZWORDS WILL BE, BLOCKED ACUTE BEDS,  
25   WAREHOUSING OF PEOPLE IN NURSING HOMES, SUB-ACUTE FACILITIES



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1 THAT DON'T DESERVE TO BE THERE, AN INCREASE IN COMPLICATION  
2 RATES, DEATH RATES, AND ALSO A NEGLECT OF QUALITY OF CARE FOR  
3 BOTH PATIENTS AND THEIR CARE GIVERS. IN HARSH ECONOMIC TIMES,  
4 WE EXPECT THAT WE'LL HAVE TO BE DOWNSIZED, RIGHT-SIZED,  
5 REENGINEERED. REMEMBER, BOARD OF SUPERVISORS, THAT RANCHO WENT  
6 THROUGH ITS DISPROPORTIONATE SHARE OF DOWNSIZING IN 1995.  
7 CLOSURE, SUPERVISOR YAROSLAVSKY, IS AN IRREVOCABLE DECISION,  
8 AND ALTHOUGH OUR STAFF AND TEAMS AT RANCHO HAVE HELD ON NOW,  
9 WE'VE HAD VERY LITTLE ATTRITION, I THINK YOUR VOTE TODAY COULD  
10 BE VERY SYMBOLIC. IT'S GOING TO BE VERY HARD TO HOLD THE SHIP  
11 TOGETHER AND WE'LL REGRET IT WHEN THE SUN SHINES AGAIN.  
12 ADOPTION WOULD BE BETTER THAN BEING AN UNWANTED CHILD,  
13 PROBABLY A SAD PLIGHT OF ANOTHER L.A. COUNTY FACILITY THAT'S  
14 NOT WANTED. SO I WOULD URGE YOU THAT IF THE BOARD OF  
15 SUPERVISORS DOESN'T FEEL THAT IT CAN AFFORD A PREMIER REHAB  
16 INSTITUTION IN ITS CURRENT RE-MISSIONING, PLEASE FIND US A  
17 FOSTER PARENT THAT CAN. THANK YOU FOR FINDING US ANOTHER WAY.  
18 [ Applause ].

19

20 **SUP. BURKE, CHAIR:** THANK YOU. DR. ZWELLIN, I DON'T THINK  
21 SPOKE, SHE'S GONE, SHE HAD TO LEAVE. OKAY. DR. MOON.

22

23 **HELENA CHUI:** MAY I ADD MY --

24



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1   **SUP. BURKE, CHAIR:** ABSOLUTELY. THANK YOU VERY MUCH. DR. MOON  
2   AND THEN DR. PERRY, I THINK, HAS SPOKEN. AND THEN AFTER DR.  
3   MOON, DR. SAX AND THEN DR. SCOTT. SAX, ANDY SAX AND THEN DR. -  
4   -

5

6   **SPEAKER:** [ Inaudible ].

7

8   **SUP. BURKE, CHAIR:** OKAY, ALL RIGHT. THEN DR. SCOTT WILL FOLLOW  
9   DR. MOON.

10

11   **DR. RICHARD MOON:** GOOD AFTERNOON. MY NAME IS DR. MOON, AND, DR.  
12   RICHARD MOON, AND I'M A SECOND YEAR RESIDENT INTERNAL MEDICINE  
13   AT L.A. COUNTY U.S.C. GENERAL HOSPITAL, ALSO A MEMBER OF THE  
14   JOINT COUNCIL INTERN AND RESIDENTS. SO IF YOU'RE LOOKING FOR  
15   SOMEBODY ON THE FRONT LINE, THEN YOU'RE LOOKING AT ONE OF  
16   THEM. I, TOO, OPPOSE A HUNDRED-BED REDUCTION AT L.A. COUNTY  
17   U.S.C. AND THE CLOSURE AT RANCHO, PROPOSED CLOSURE AT RANCHO.  
18   ASIDE FROM THE DISPLACEMENT OF THOUSANDS OF LIVES EVERY YEAR,  
19   THE DECISION TO DO BOTH OF THESE DECISIONS WOULD SPELL A  
20   MEDICAL CATASTROPHE FOR THE COUNTY. DISEASE AND ILLNESS FALLS  
21   ON A SPECTRUM. AT ONE END, THE SICKEST OF THE SICK YOU HAVE AT  
22   ONE END, REQUIRING INTENSIVE CARE UNIT AND CLOSELY MONITORED  
23   SETTINGS. AND AT THE OTHER END YOU HAVE THOSE PATIENTS WHO  
24   REQUIRE A SUB ACUTE BUT STILL CHRONIC CARE MUCH LIKE THOSE  
25   GIVEN SERVICES MUCH LIKE THOSE SEEN AT RANCHO. AND IN THE



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1 MIDDLE YOU HAVE THE PATIENTS, THE LARGEST GROUP WHO REQUIRE  
2 INPATIENT AND HOSPITALIZATION FOR ABOUT TWO TO FIVE DAYS. THE  
3 CLOSURE OF RANCHO WOULD CAUSE PATIENTS THAT WOULD REQUIRE AND  
4 WOULD BENEFIT FROM SERVICES TO TRANSFER AT RANCHO, THESE  
5 PATIENTS WOULD NOT BE ALLOWED TO BE TRANSFERRED TO RANCHO AND  
6 WILL REMAIN AT L.A.C./U.S.C. FOR AS LONG AS POSSIBLE OR  
7 HOPEFULLY -- UNFORTUNATELY, WHAT MIGHT HAPPEN IS THEY MIGHT BE  
8 DISCHARGED HOME WITH MINIMAL OR NO SERVICES AT ALL. AND WITH  
9 THE FEW BEDS THAT REMAIN FOR THOSE PATIENTS, FEWER AND FEWER  
10 BEDS WITH YOUR PROPOSED CLOSURE OF A HUNDRED MORE BEDS AT L.A.  
11 COUNTY, THOSE WOULD BE RESERVED FOR THE SICKEST OF THE SICK.  
12 AND AS YOU DO THAT, THE LARGEST SUBSECTION OF PATIENTS,  
13 PATIENTS WHO WOULD REQUIRE IN-PATIENT STAYS FOR TWO TO FIVE  
14 DAYS WILL NEVER BE FORCED TO BE SENT AND DISCHARGED HOME  
15 WITHOUT ALL THEIR MEDICAL ISSUES BEING ADDRESSED, THEY WILL  
16 INEVITABILITY BE TURNED BACK SICKER AND YOU'RE UNABLE TO TAKE  
17 CARE OF THE PROBLEMS AS WELL AS YOU COULD HAVE THE FIRST TIME,  
18 THE RIGHT TIME. IT'S REALLY SAD IN THIS DAY AND AGE WHEN WE  
19 TALK SO MUCH ABOUT HOMELAND SECURITY, WHEN WE FEAR ABOUT  
20 TERRORISM FROM AN OUTSIDE SOURCE GETTING SOME KIND OF SOURCE  
21 OF INFECTIOUS DISEASE, WHEN THE REAL THREAT, THE REALITY OF  
22 THE MATTER IS THAT THE REAL THREAT COMES FROM BEING TERRORIZED  
23 BY A WHOLE HOST OF INFECTIOUS DISEASES THAT WERE SET LOOSE BY  
24 THIS COUNTY BOARD OF SUPERVISORS. TO THE COUNTY, STATE,  
25 FEDERAL GOVERNMENT AND PRESS I ASK YOU TO MARK MY WORDS TODAY.





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1 FURTHER CLOSURE OF ANY FACILITIES IN THE COUNTY OF L.A. WILL  
2 REAP FOR THIS COUNTY THE DUBIOUS DISTINCTION OF THE SICKEST  
3 COUNTY OF THE UNITED STATES OF AMERICA, AND IF YOU SHOULD DO  
4 SO, AND IF YOU SHOULD DO SO, THIS WILL BE SOMETHING THAT WILL  
5 BE A TERRIBLE, HAUNTING LEGACY FOR THE COUNTY OF L.A.  
6 ALTERNATIVELY, YOU COULD CHOOSE TO TURN TO OTHER SOURCES,  
7 CHARITABLE INSTITUTIONS, STATE, AND FEDERAL, TO CHOOSE TO ASK  
8 THEM AND STAKE YOUR PERSONAL LIVES AND YOUR POLITICAL LEAVES  
9 ON THE LINE FOR THE LIFE OF ANOTHER. THANK YOU. [ Enthusiastic  
10 Cheers and Applause ].

11

12 **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH. DR. SCOTT AND THEN ROB  
13 -- DR. SWENSON IS SPEAKING FOR DR. ZWELLIN, AND WE'LL FOLLOW  
14 DR. SCOTT, AND THEN DR. LAWRENCE CLARK WILL FOLLOW DR.  
15 SIMPSON. THANK YOU DR. SCOTT?

16

17 **DR. MICHAEL SCOTT:** MADAM CHAIR WOMAN, HONORABLE SUPERVISORS.  
18 I'M DR. MICHAEL SCOTT, I'M A SPECIALIST IN PHYSICAL MEDICINE  
19 AND REHABILITATION IN RANCHO LOS AMIGOS, WHERE I'VE WORKED FOR  
20 THE PAST 10 YEARS AS CHIEF OF THE SPINAL CORD INJURY  
21 REHABILITATION PROGRAM. WE ARE ALL AWARE OF THE ENORMOUS  
22 BUDGET DEFICIT FACING LOS ANGELES COUNTY. WE ARE FAMILIAR WITH  
23 THE BLUE REPORT WHICH INDICATES THAT THE COUNTY WILL IN FACT  
24 SAVE A SIGNIFICANT SUM OF MONEY BY CLOSING RANCHO. WE HAVE  
25 ALSO HEARD TESTIMONY TODAY ATTESTING TO THE FACT THAT RANCHO



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1 PROVIDES HIGHLY SPECIALIZED REHABILITATION SERVICES, THAT  
2 AMAZING THINGS ARE ACCOMPLISHED THERE, AND THAT IT HAS  
3 RECEIVED NATIONAL AND INTERNATIONAL RECOGNITION. SO I KNOW  
4 THAT DR. GARTHWAITE AND THE BOARD OF SUPERVISORS ARE NOT  
5 MOVING DOWN THIS ROAD TO CLOSURE WITHOUT SERIOUS  
6 CONSIDERATION, BUT I BELIEVE IT IS THE WRONG THING TO DO AND  
7 IT SENDS THE WRONG MESSAGE. THE MESSAGE BEING SENT IS THAT  
8 WHEN TIMES ARE TOUGH AND MONEY IS TIGHT, REHABILITATION IS THE  
9 FIRST TO GO. THAT REHABILITATION IS EXPENDABLE, THAT IT'S  
10 ELECTIVE CARE. WE ARE SENDING THE MESSAGE THAT PEOPLE WITH  
11 DISABILITIES DON'T MATTER, AND BECAUSE THE PEOPLE THAT RANCHO  
12 PRIMARILY SERVES ARE THOSE WITH LIMITED RESOURCES, THE  
13 INDIGENT, THE UNINSURED, THE UNDERINSURED, WE ARE ALSO SAYING  
14 THAT THIS GROUP DOESN'T NEED OR DESERVE REHABILITATION. WE'VE  
15 HEARD TESTIMONY TODAY THAT THE COMMUNITY WILL NOT BE ABLE TO  
16 PROVIDE REHAB SERVICES TO THESE PATIENTS, AND THAT IS A  
17 TRAGEDY. ESSENTIALLY WE ARE TURNING BACK THE CLOCK. FOR YEARS,  
18 WE HAVE WORKED HARD TO EDUCATE AND DEMONSTRATE TO THE MEDICAL  
19 COMMUNITY AS WELL AS THE COMMUNITY AT LARGE THE BENEFITS OF  
20 REHABILITATION. AND IN THE LONG RUN, THE COST EFFECTIVENESS OF  
21 REHABILITATION. WE ARE NOW TURNING BACK THE CLOCK TO A TIME  
22 NOT THAT LONG AGO WHEN IF YOU HAD A SPINAL CORD INJURY YOU  
23 WERE PLACED IN A WOODEN BOX FILLED WITH SAWDUST, AND THE  
24 SAWDUST WAS THERE TO SOAK UP THE FOUL SMELLING OOZING FLUID  
25 FROM THE GAPING PRESSURE SORE IN YOUR BUTTOCKS AND SOAK UP THE



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1 URINE AND FECES FROM YOUR NEUROGENIC BOWEL AND BLADDER, AND  
2 YOU WOULD BE SHIPPED OFF TO A WAREHOUSE-LIKE INSTITUTION WHERE  
3 YOU WOULD SOON DIE FROM WHAT WE KNOW TODAY TO BE PREVENTABLE  
4 COMPLICATIONS. IT WOULD HAVE BEEN INCONCEIVABLE TO EVEN THINK  
5 ABOUT RETURNING HOME, BEING INDEPENDENT, RETURNING TO YOUR  
6 ROLE AS A PARENT, A SPOUSE, A PROVIDER FOR YOUR FAMILY, OR TO  
7 ACHIEVE THE QUALITY OF LIFE THAT MANY OF OUR PATIENTS ARE ABLE  
8 TO ACHIEVE TODAY. WE'VE COME TOO FAR AND WE CAN'T AFFORD TO GO  
9 BACKWARD. AS WE FACE THESE DIFFICULT FISCAL DECISIONS, WE NEED  
10 TO GIVE EQUAL WEIGHT TO THE LONG-TERM HUMAN COSTS AND  
11 CONSEQUENCES. WE NEED TO SET AN EXAMPLE. PUBLIC HOSPITALS AND  
12 COUNTIES ACROSS THIS NATION ARE WATCHING TO SEE HOW LOS  
13 ANGELES COUNTY AND THE STATE OF CALIFORNIA WILL CONFRONT THIS  
14 CRISIS. WE MUST SEND THE RIGHT MESSAGE. IF THE DEPARTMENT OF  
15 HEALTH SERVICES CAN'T AFFORD RANCHO AS IT EXISTS, THEN WE MUST  
16 FIND A WAY TO PRESERVE THE ESSENCE OF RANCHO AND CONTINUE TO  
17 MAKE AVAILABLE HIGH QUALITY, SPECIALIZED REHABILITATION  
18 SERVICES TO PATIENTS OF LIMITED MEANS IN L.A. COUNTY. THANK  
19 YOU VERY MUCH.

20  
21 **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH. [ Applause ]

22  
23 **SUP. BURKE, CHAIR:** DR. SIMPSON.



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1   **ROB SIMPSON:** HI, MY NAME IS ROB SIMPSON WITH THE L.A. COUNTY  
2   MEDICAL ASSOCIATION, AND I WILL BE READING A STATEMENT  
3   PREPARED BY DR. MARCY ZWELLING ARMONT, WHO IS THE PRESIDENT-  
4   ELECT OF OUR ASSOCIATION. I COME HERE TODAY AS AN OPTIMIST.  
5   I'M NOT GOING TO SPEAK AT LENGTH ABOUT THAT WHICH THE BOARD OF  
6   SUPERVISORS ALREADY KNOWS. RANCHO IS A SHINING STAR, AN  
7   EXAMPLE OF WHAT THE L.A. COUNTY D.H.S. CAN DO TO PROVIDE THE  
8   VERY FINEST COMPLEX HEALTHCARE SERVICES TO ITS RESIDENTS.  
9   RANCHO IS A WORLD-CLASS, HIGHLY-RESPECTED AND ALMOST  
10   EXHAUSTIBLE REHABILITATION CENTER DRAWING PATIENTS FROM AROUND  
11   THE WORLD. OVER DECADES RANCHO HAS STEADILY CONTRIBUTED TO THE  
12   WORLD'S PRODUCTIVE WORKFORCE BY GIVING OTHERWISE DEBILITATED  
13   PATIENTS AN OPPORTUNITY TO REMAIN INDUSTRIOUS. L.A. CAN ONLY  
14   BE PROUD. L.A. COUNTY'S FINANCIAL CRISIS REFLECTS THE ENTIRE  
15   COUNTY'S STRUGGLE TO FIND THE DOLLARS NECESSARY TO CARE FOR  
16   THE SICK AND NEEDY. WE ARE NO EXCEPTION. L.A. IS IN NEED OF  
17   CREATIVE, CONSTRUCTIVE ANSWERS TO ISSUES THAT AMERICANS HAVE  
18   FAILED TO ADDRESS FOR DECADES. WHAT IS HEALTHCARE, WHO PAYS  
19   FOR IT, HOW MUCH SHOULD IT COST, HOW DO WE DISTRIBUTE OUR  
20   RESOURCES WHEN DEMAND IS FOREVER INCREASING WHILE CAPACITY IS  
21   RELENTLESSLY CONTRACTING. WHO IS ULTIMATELY ACCOUNTABLE FOR  
22   THESE DECISIONS? CRISIS OFTEN BRINGS THE UNUSUAL AMOUNT -- AN  
23   UNUSUAL AMOUNT OF CREATIVE ENERGY TO THE TABLE. THAT'S WHY I'M  
24   OPTIMISTIC. THE BOARD OF SUPERVISORS HAS AN INCREDIBLE  
25   OPPORTUNITY TODAY TO DIRECT THE EVOLUTION OF RANCHO INTO A



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1 REHABILITATION CENTER THAT IS MORE ACCESSIBLE TO ALL  
2 HEALTHCARE SECTORS. AT THIS TIME, OUR PRIVATE PATIENTS DO NOT  
3 HAVE ACCESS TO THE MIRACLES OF RANCHO. THE STRINGS THAT ARE  
4 ATTACHED TO DOLLARS COMING FROM THE STATE AND FEDERAL  
5 GOVERNMENTS THROUGH WAIVERS MAKE IT IMPOSSIBLE TO RUN RANCHO  
6 LIKE A BUSINESS. MOVING TO A PRIVATE, NOT-FOR-PROFIT  
7 ENTERPRISE WILL ALLOW RANCHO TO AVAIL ITSELF TO NEW ENDOWMENT  
8 DOLLARS AND TO ENTER THE MARKETPLACE WITH THE AUTHORITY AND  
9 THE EXPERTISE TO COMPETE FOR REHABILITATION PATIENTS ON THE  
10 BASIS OF THE HIGH QUALITY OF CARE ITS REPUTATION HAS EARNED  
11 ITSELF. STUDIES BY GILL BASANO SUGGEST THAT A TRANSITION TO A  
12 NOT-FOR-PROFIT HOSPITAL MODEL IS FISCALLY RESPONSIBLE AND  
13 VIABLE. NOW THAT'S EXCITING. AS AN INTERNIST PRACTICING HERE  
14 IN L.A., I'M THRILLED THAT RANCHO COULD BE MORE ACCESSIBLE TO  
15 MY PATIENTS. YOU CAN BET I'LL BE RECOMMENDING ITS SERVICES TO  
16 MY PATIENTS IN NEED OF REHABILITATION. I CANNOT EVEN IMAGINE  
17 WHAT WOULD HAPPEN SHOULD RANCHO BE FORCED TO CLOSE ITS DOORS.  
18 IN THAT EVENT, PATIENTS WOULD FIND THEMSELVES FACING A  
19 LIFETIME OF DISABILITY AND REJECTION, UNABLE TO MERGE BACK  
20 INTO SOCIETY, UNABLE TO FUNCTION ACCEPTABLY. L.A. COUNTY  
21 DOCTORS FEEL STRONGLY THAT THE BOARD MUST USE ITS POWERS TO  
22 OPEN THE DOOR FOR QUALITY CARE, NOT TO CLOSE THE DOOR ON AN  
23 INSPIRED VISION. IN SUMMARY, PRACTICING PHYSICIANS FROM ALL  
24 OVER L.A. COUNTY WILL BE EAGER TO WATCH THIS TRANSITION. WE  
25 KNOW THAT THE BOARD UNDERSTANDS THE OPPORTUNITY THAT LIES



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1 BEFORE IT, TO MAINTAIN AND IN TIME ACTUALLY EXPAND THE  
2 SERVICES OFFERED AT RANCHO, ONCE A SHINING STAR EMERGING INTO  
3 A FISCALLY RESPONSIBLE GALAXY OF SERVICES ABLE TO COMPETE IN  
4 THE HEALTHCARE MARKETPLACE. IN TIME PATIENTS, PARENTS AND  
5 CHILDREN WILL BE FOREVER GRATEFUL THAT YOU GRABBED THIS  
6 OCCASION TO LOOK INTO THE FUTURE AND GIVE GOOD QUALITY CARE A  
7 CHANCE. THANK YOU FOR ALLOWING ME TO SPEAK BEFORE YOU TODAY.

8

9 **SUP. KNABE:** THANK YOU. DR. CLARK.

10

11 **FLORENCE CLARK:** YES.

12

13 **SUP. KNABE:** DR. SHERYL RESNICK, DR. MOHAMMAD CONN. IS DR. CONN  
14 HERE? DR. WILLIAM GOODALL? DR. EDWARD NEWTON. GO AHEAD DR.  
15 CLARK.

16

17 **FLORENCE CLARK:** THANK YOU, MADAM -- WELL, MADAM CHAIR ISN'T  
18 HERE. THANK YOU, SUPERVISORS, FOR THIS OPPORTUNITY. I'M  
19 FLORENCE CLARK, I'M PROFESSOR AND CHAIR OF THE U.S.C.  
20 DEPARTMENT OF OCCUPATIONAL SCIENCE AND OCCUPATIONAL THERAPY. I  
21 KNOW IN A FIRSTHAND WAY ABOUT THE DANGERS THAT THIS DECISION  
22 POSES ON SCORES OF SURVIVORS OF CATASTROPHIC ILLNESS AND  
23 DISABILITY BECAUSE OF MY RESEARCH. FOR THE PAST THREE YEARS,  
24 MY RESEARCH, IN COLLABORATION WITH RANCHO LOS AMIGOS HOSPITAL,  
25 HAS BEEN ON THE LIFE SITUATIONS OF PEOPLE WITH SPINAL CORD



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1 INJURY WHO HAVE THESE PRESSURE SORES AND WHO DEPEND ON RANCHO  
2 LOS AMIGOS HOSPITAL TO SUSTAIN THEM. I HAVE WITNESSED DEATHS  
3 OF PEOPLE IN OUR STUDY BECAUSE THEY HAVE AT TEAMS, HAD TO  
4 UTILIZE OTHER EMERGENCY SERVICES. FOR YOU AND ME, A SCRATCH ON  
5 ONE'S FINGER SUCH AS MINE WOULD HEAL IN ABOUT TWO OR THREE  
6 WEEKS. BUT FOR SOMEONE WITH A PRESSURE SORE, A SCRATCH LIKE  
7 THAT CAN BE A LIFE-THREATENING INCIDENT IF IT'S NOT HANDLED  
8 PROPERLY. SIMPLY STATED, WITHOUT RANCHO, UNNECESSARY PREMATURE  
9 DEATHS FOR NUMEROUS PEOPLE WITH DISABILITY WILL BECOME AN  
10 EVERYDAY OCCURRENCE. I WOULD ALSO POINT OUT THAT THE CLOSURE  
11 OF RANCHO MAY NOT NECESSARILY BENEFIT THE COUNTY BUDGET  
12 ULTIMATELY IN THE BIG PICTURE. DUE TO THE LOSS OF  
13 REHABILITATIVE AND PREVENTIVE SERVICES THAT CANNOT BE OFFERED  
14 IN LESS SPECIALIZED FACILITIES THE LONG-TERM RESULT OF CLOSING  
15 RANCHO MAY ACTUALLY BE AN INCREASE OF COST IN OTHER AREAS AS A  
16 RESULT OF NEW PROBLEMS THAT EMERGE. FOR EXAMPLE, CLOSURE OF  
17 RANCHO WOULD LEAD TO GREATER UNEMPLOYMENT, MORE NEED FOR  
18 INSTITUTIONALIZATION AND ALSO SUBSEQUENT COUNTY ASSISTANCE.  
19 COSTS MAY BE SHIFTED BUT THEY MAY NOT BE LESSENERED AND LIVES,  
20 PRECIOUS HUMAN LIVES WILL BE COMPROMISED IN THE PROCESS.  
21 ELIMINATION OF RANCHO WILL CREATE YET ANOTHER FORM OF NEGLECT  
22 FOR PEOPLE FROM OUR COUNTY'S UNDERSERVED NEIGHBORHOODS. OF THE  
23 PARTICIPANTS IN MY STUDY WITH SPINAL CORD INJURY, MOST COME  
24 FROM IMPOVERISHED LATINO AND AFRICAN-AMERICAN NEIGHBORHOODS.  
25 RECRUITED INTO GANGS WHEN, IN MIDDLE CHILDHOOD OR LIVING IN





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1 GANG-INFESTED NEIGHBORHOODS, MANY INCURRED SPINAL CORD  
2 INJURIES FROM GUNSHOT WOUNDS BEFORE THEY WERE 20 YEARS OF AGE.  
3 TODAY, THEY ARE ADULTS AND HAVE LIVED SUCCESSFULLY WITH SPINAL  
4 CORD INJURIES FOR YEARS, LARGELY BECAUSE OF THE ONGOING  
5 SPECIALIZED SERVICES OF RANCHO LOS AMIGOS HOSPITAL. IF WE ARE  
6 INEFFECTIVE IN ELIMINATING URBAN CRIME THAT BRINGS ABOUT SUCH  
7 DISABILITIES, AT THE VERY LEAST, OUR COUNTY MUST PROVIDE THE  
8 SERVICES TO TAKE CARE OF THOSE WHO ARE ITS VICTIMS. THE SCHOOL  
9 SYSTEM HAS FAILED THESE CITIZENS WHEN THEY WERE CHILDREN. WORK  
10 OPPORTUNITIES HAVE BEEN LIMITED AND NOW A HEALTHCARE SYSTEM  
11 THAT SUSTAINS THEM HAS COLLAPSED.

12

13 **SUP. BURKE, CHAIR:** DR. RESNICK, YES YOUR TIME HAS ELAPSED. I'M  
14 SORRY.

15

16 **FLORENCE CLARK:** I'M DR. CLARK, BUT THAT'S OKAY.

17

18 **SUP. BURKE, CHAIR:** ALL RIGHT. THEN DR. RESNICK, AND THEN ALSO  
19 COULD DR. GRIGGSLY COME FORWARD AFTER DR. NEWTON.

20

21 **CHERYL RESNICK:** GOOD AFTERNOON. I WOULD LIKE TO SUBMIT MY  
22 TESTIMONY AS WELL AS LETTERS FROM YOUR CONSTITUENTS THAT WERE  
23 SENT TO ME THIS WEEKEND. MY NAME IS CHERYL RESNICK, I AM A  
24 SECRETARY OF THE CALIFORNIA PHYSICAL THERAPY ASSOCIATION AND  
25 I'M AN ASSISTANT PROFESSOR OF CLINICAL PHYSICAL THERAPY AT THE



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1 UNIVERSITY OF SOUTHERN CALIFORNIA. I'M SPEAKING ON BEHALF OF  
2 THE CALIFORNIA PHYSICAL THERAPY ASSOCIATION AND AS A PATIENT  
3 ADVOCATE. AS A PHYSICAL THERAPIST WITH 30 YEARS' EXPERIENCE,  
4 NEARLY HALF OF WHICH WERE SPENT AS A THERAPIST AT RANCHO, I'VE  
5 SEEN FIRSTHAND THE IMPACT OF RANCHO ON THE WORLD OF  
6 REHABILITATION. FROM A PHYSICAL THERAPIST'S PERSPECTIVE, I'VE  
7 SEEN RANCHO SERVE AS THE EDUCATIONAL LEADER IN PROVIDING  
8 EXCELLENT TRAINING FOR THOUSANDS OF PHYSICAL THERAPISTS AND  
9 ASSISTANTS AND AS THE LEADER IN CONDUCTING CLINICAL RESEARCH  
10 THAT ALLOWS REHABILITATION SPECIALISTS TO DELIVER THE MOST  
11 EFFICACIOUS PATIENT CARE. THIS TRAINING HAS RESULTED IN THE  
12 UNITED STATES, NOT JUST CALIFORNIA, HAVING A POOL OF SKILLED  
13 CLINICIANS WHO EXCEL IN THE CARE OF THOSE SUFFERING  
14 CATASTROPHIC INJURY. THE TYPE OF TRAINING AVAILABLE AT RANCHO  
15 IS NOT EASILY DUPLICATED, AND IF RANCHO IS CLOSED, THE EFFECT  
16 ON THE TRAINING OF ALL REHABILITATION SPECIALISTS WILL BE  
17 IMMENSE. MORE IMPORTANTLY, THOUGH, IS THE EFFECT ON THE  
18 DISABLED COMMUNITY. THE CARE DELIVERED TO THOSE PEOPLE WHO  
19 COME THROUGH RANCHO'S DOORS ENABLES THE LUCKIEST TO RETURN TO  
20 PRODUCTIVE LIVES. IN THE MOST UNFORTUNATE CIRCUMSTANCES, IT  
21 ENABLES FAMILIES TO TAKE THEIR LOVED ONES HOME AND PROVIDE THE  
22 CARE THAT PREVENTS OR AT LEAST POSTPONES RETURNS TO THE ACUTE  
23 CARE SETTING. THIS CARE IS NOT GENERALLY AVAILABLE IN THE  
24 COMMUNITY AS YOU HAVE HEARD REPEATEDLY TODAY. CLOSURE OF  
25 RANCHO WILL MEAN THAT THOUSANDS OF DISABLED LOS ANGELES



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1 COUNTY, THOUSANDS IN LOS ANGELES COUNTY WILL HAVE NO PLACE TO  
2 GO THAT OFFERS THE EXPERTISE THEY NEED TO REMAIN IN THE  
3 COMMUNITY AND THE NUMBER OF HOSPITALIZATIONS WILL INCREASE.  
4 PROFESSOR STEVEN HAWKING TOLD ME THAT HE IS SURE THAT THERE  
5 ARE MANY DISABLED PEOPLE WHO ARE SMARTER THAN HE IS AND  
6 SOCIETY HAS AN OBLIGATION TO ASSIST THEM. WE HAVE A LOT TO  
7 GAIN AND QUITE A LOT TO LOSE. I ASK THAT BEFORE YOU CLOSE  
8 RANCHO, VERY SERIOUS CONSIDERATION BE GIVEN TO FINDING SOME  
9 ALTERNATIVE FOR THE CARE OF THE DISABLED. DO NOT  
10 DISENFRANCHISE THIS SEGMENT OF OUR POPULATION. THANK YOU VERY  
11 MUCH FOR YOUR TIME.

12

13 **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH. DR. NEWTON FOLLOWED BY  
14 DR. GRIGGSBY.

15

16 **DR. NEWTON:** MADAM CHAIRMAN AND HONORABLE BOARD MEMBERS, THANK  
17 YOU FOR THIS OPPORTUNITY. I'D LIKE TO START BY INTRODUCING  
18 WHAT I DO. I'M THE CHIEF OF EMERGENCY MEDICINE AT L.A. COUNTY  
19 U.S.C. FOR THE PAST APPROXIMATELY NINE MONTHS, I'VE TAKEN THAT  
20 JOB, BUT I'VE WORKED THERE FOR 20 YEARS AND THE BUSIEST  
21 EMERGENCY DEPARTMENT IN THE COUNTRY. I'D LIKE TO JUST GIVE YOU  
22 A SNAPSHOT OF WHAT IT'S LIKE TO WORK THERE RIGHT NOW AND WHAT  
23 I ANTICIPATE IT WOULD BE LIKE ONCE WE -- IF THOSE A HUNDRED  
24 BEDS ARE CLOSED AT L.A. COUNTY U.S.C. CURRENTLY WE'RE HOLDING  
25 BETWEEN 20 AND 40 ADMITTED INPATIENTS IN A ROOM THAT HAS 22



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1 TREATMENT AREAS, SO THAT MEANS THAT THERE'S AT LEAST HALF OF  
2 THOSE PARENTS ARE ALREADY IN THE HALLWAYS BEING TREATED. HALF  
3 OF THE PATIENTS THAT WE'RE HOLDING FOR ADMISSIONS ARE WAITING  
4 FOR I.C.U. TYPE BEDS. THESE PATIENTS CAN STAY FOR UP TO FIVE  
5 DAYS IN THE HALLWAYS OF THE EMERGENCY DEPARTMENT ALREADY.  
6 THAT'S AN ENVIRONMENT WHERE THE LIGHTS NEVER GO OFF, THE  
7 ACTIVITY LEVEL NEVER SLOWS DOWN, THE NOISE LEVEL NEVER STOPS,  
8 AND THE DEMANDS ON THE NURSING STAFF IN THAT SITUATION ARE  
9 SUCH THAT WE'RE NOT ABLE EVEN NOW TO DELIVER MEDICAL TREATMENT  
10 IN A TIMELY WAY AND LET ALONE PROVIDE SOME OF THE CARE FOR  
11 PATIENTS LIKE INFORMATION ABOUT THEIR DISEASE AND SO ON.  
12 DURING THE TIME THAT WE'RE CARING FOR THESE 40 INPATIENTS,  
13 WE'RE ALSO PROCESSING 350 PARENTS A DAY, NEW PATIENTS WHO ARE  
14 ARRIVING FOR EMERGENCY CARE. WE HAVE EIGHT NURSES PER SHIFT  
15 THAT ARE PROVIDING THIS CARE. IT'S JUST PHYSICALLY IMPOSSIBLE  
16 FOR THEM-TO-PROVIDE SAFE CARE UNDER THESE CIRCUMSTANCES. EVERY  
17 TIME WE CLOSE BEDS IN THE MEDICAL CENTER FOR NURSING SHORTAGES  
18 OR RENOVATIONS, THERE'S A ONE-TO-ONE RELATIONSHIP BETWEEN  
19 THOSE CLOSURES AND THE NUMBER OF PATIENTS WE HOLD IN THE E.R.  
20 IF WE CLOSE 20 BEDS, WE HAVE 20 MORE PATIENTS WAITING IN THE  
21 E.R. IF WE CLOSE A HUNDRED BEDS, WE'RE GOING TO HAVE A HUNDRED  
22 MORE PATIENTS WAITING IN THE E.R. THAT'S OBVIOUSLY NOT  
23 PHYSICALLY POSSIBLE TO DO. WE CAN'T HOUSE A HUNDRED PATIENTS  
24 IN THE 22-BED E.R. THAT MEANS PARENTS ARE GOING TO BE SPREAD  
25 DOWN THE HALLWAYS AND NOT RECEIVE THE KIND OF CARE THAT THEY



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1    NEED. ONCE WE BACK UP, THE WHOLE SYSTEM BACKS UP. ALL OF THE  
2    EMERGENCY DEPARTMENTS IN THE COUNTY ARE GOING TO BE AFFECTED  
3    BY THIS HUNDRED-BED CLOSURE. WE'RE GOING TO REVISIT GRIDLOCK  
4    THAT WE HAD BACK IN THE EARLY -- IN THE LATE '80s WHERE  
5    AMBULANCES COULD NOT FIND ANYWHERE TO LAND WITH THEIR  
6    PATIENTS. THAT'S GOING TO AFFECT PEOPLE WITH PRIVATE INSURANCE  
7    AS WELL AS THE COUNTY PATIENTS. I WOULD ALSO JUST LIKE TO ADD  
8    MY SUPPORT FOR THE MAINTAINING RANCHO OPEN BECAUSE I THINK  
9    THAT THEY PERFORM AN ESSENTIAL SERVICE IN THE WHOLE COUNTY  
10   SYSTEM.

11

12   **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH. NOW DR. GRIGGSBY AND  
13   THEN MUHAMMAD CONN, DR. MUHAMMAD CONN AND DR. GOODHALL. ARE  
14   THEY HERE? OR HAVE THEY LEFT? ALL RIGHT.

15

16   **EUGENE GERIGCBY:** MADAM CHAIRPERSON, AND MEMBERS OF THE BOARD,  
17   MY NAME IS GENE GERIGCBY, I'M THE PRESIDENT OF THE NATIONAL  
18   HEALTH FOUNDATION. THIS BOARD REQUESTED THAT N.H.F. IN  
19   COOPERATION WITH THE DEPARTMENT OF HEALTH SERVICES AND THE  
20   C.A.O. UTILIZE A MODEL THAT WE HAVE FOR ASSESSING THE IMPACTS  
21   OF PUBLIC POLICY DECISIONS ON VARIOUS SCENARIOS THAT THE  
22   COUNTY WAS CONSIDERING, SCENARIOS ONE, TWO, AND THREE, AND YOU  
23   ASKED THAT WE LOOK AT SCENARIO THREE AND WHAT ITS IMPACT MIGHT  
24   BE ON VARIOUS ASPECTS OF THE HEALTHCARE SYSTEM IN LOS ANGELES  
25   COUNTY. FOR PURPOSES OF TODAY, I'M ONLY GOING TO REPORT ON THE



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1 IMPACT OF THE CLOSURE OR THE REDUCTION OF 100 BEDS OUT OF BIG  
2 L.A.C. PLUS U.S.C. AS WELL AS THE POTENTIAL CLOSURE OF RANCHO  
3 LOS AMIGOS HOSPITAL. IN TERMS OF THE IMPACT ON THE SYSTEM AS A  
4 WHOLE, IF YOU WERE TO REDUCE THE HUNDRED BEDS IN L.A. U.S.C.  
5 HOSPITAL, YOU WILL INCREASE THE OVERALL OCCUPANCY RATE FOR MED  
6 SURGE BEDS IN THE COUNTY BY ONLY ONE PERCENT. THE OCCUPANCY  
7 RATE THROUGHOUT THE COUNTY WOULD BE 63%. HOWEVER, THIS RATE AT  
8 VARIOUS SPOTS, PARTICULARLY ANTELOPE VALLEY, METRO, AND SOUTH  
9 BAY WOULD GO FROM 64 TO 67% IN ANTELOPE VALLEY, 60 TO 61% IN  
10 METRO AND 69 TO 70% IN SOUTH BAY. SO AGAIN, THE OVERALL IMPACT  
11 ON MED SURGE BEDS THROUGHOUT THE COUNTY CAN BE ABSORBED IF YOU  
12 DO THAT. AGAIN, HOWEVER, IF YOU LOOK AT D.H.S. HOSPITALS, THE  
13 MED SURGE OCCUPANCY RATE IN D.H.S. HOSPITALS TODAY RUNS FROM A  
14 LOW OF 86% AT HIGH DESERT TO A HIGH OF 98% IN ANTELOPE VALLEY.  
15 THE RESULTS OF SCENARIO THREE WILL KEEP THOSE OCCUPANCY RATES  
16 EXTREMELY HIGH AND WILL TAKE L.A. COUNTY FROM 93% TO A HUNDRED  
17 PERCENT. THE OVERALL IMPACT WILL BE THAT PHYSICIANS COUNTYWIDE  
18 WILL BEGIN TO SEND ADDITIONAL PATIENTS NEEDING MED SURGE BEDS  
19 TO EMERGENCY DEPARTMENTS IN ORDER TO GET THOSE SERVICES  
20 BECAUSE OF THE EXTREMELY HIGH OCCUPANCY RATE IN D.H.S.  
21 HOSPITALS. IN TERMS OF RANCHO LOS AMIGOS, COUNTYWIDE AS A  
22 RESULT OF SCENARIO THREE CURRENTLY THE OCCUPANCY RATE FOR  
23 EQUIVALENT, QUOTE, UNQUOTE, "ACUTE REHAB BEDS THROUGHOUT THE  
24 COUNTY" WILL INCREASE FROM 85% TO 93%, ASSUMING EQUIVALENCY  
25 IS, IN FACT, THAT. AT THE SPA LEVEL, THERE WILL BE



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1 DIFFERENTIAL IMPACTS ON THE IMPLEMENTATION OF CLOSURE OF  
2 RANCHO LOS AMIGOS. THE RANGE FOR THE VARIOUS SPAS WILL BE A  
3 LOW OF 36% IN ANTELOPE VALLEY TO A HIGH OF 96% IN THE WEST AND  
4 SAN FERNANDO VALLEY SPOTS.

5

6 **SUP. BURKE, CHAIR:** DR. GERIGCBY, YOUR TIME HAS EXPIRED, BUT --

7

8 **GENE GERIGCBY:** I HAVE TWO POINTS AND I'LL BE FINISHED. THE  
9 BIGGEST INCREASE IN SPAS WILL BE IN SAN GABRIEL VALLEY, METRO,  
10 WEST EAST L.A. AND SOUTH BAY ALL OF WHICH WILL APPROACH OVER  
11 90% IN TOTAL OCCUPANCY RATE. A TOTAL OF 294 ADDITIONAL  
12 PATIENTS WILL BE UNABLE TO FIND REHAB BEDS AS A RESULT OF THIS  
13 DECISION AND 83% OF THOSE WILL BE UNINSURED PATIENTS.

14

15 **SUP. BURKE, CHAIR:** ALL RIGHT. IS NATIONAL HOSPITAL FOUNDATION  
16 GOING TO PARTICIPATE IN ANY WAY IN THIS STUDY AS FAR AS THE  
17 CONVERSION TO A PRIVATE NONPROFIT?

18

19 **EUGENE GERIGCBY:** WE HAVE NOT BEEN ASKED TO DO THAT. WE WOULD  
20 BE HAPPY TO DO SO.

21

22 **SUP. BURKE, CHAIR:** WOULD YOU LOOK TO SEE IF THEY HAVE SOME  
23 INTEREST?

24

25 **EUGENE GERIGCBY:** I WILL CERTAINLY FOLLOW UP ON THAT.





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1

2 **SUP. BURKE, CHAIR:** I THINK IT WOULD BE VERY POSITIVE TO HAVE  
3 ALL OF THE FOUNDATIONS MOVING IN THE SAME DIRECTION AND  
4 CERTAINLY SOME OF THE STUDIES WOULD BE IMPORTANT.

5

6 **SUP. KNABE:** WELL I THINK JACK SHAIKLEY, AT LEAST WHEN HE MET  
7 WITH ME, INDICATED THAT THERE'S OBVIOUSLY A LOT OF DATA  
8 ACCUMULATED WOULD BE IMPORTANT IN THIS WHOLE STRUCTURE, SO --

9

10 **SUP. BURKE, CHAIR:** RIGHT, SO IF YOU WOULD BE WILLING TO WORK  
11 WITH HIM.

12

13 **EUGENE GERIGCBY:** I WILL FOLLOW UP AND CHECK ON THAT.

14

15 **SUP. BURKE, CHAIR:** OKAY WOULD YOU DO THAT WITH JACK SHAIKLEY.

16

17 **EUGENE GERIGCBY:** I HAVE THE SUMMARY REPORT.

18

19 **SUP. BURKE, CHAIR:** GREAT. THANK YOU. WE WILL NOW MOVE TO ALL  
20 OF THE OTHER PEOPLE WHO HAVE ASKED TO SPEAK. WE WOULD ASK THAT  
21 YOU LIMIT YOUR COMMENTS TO TWO MINUTES, AND IF YOU CAN  
22 POSSIBLY -- IF IT'S REPETITIVE, IF YOU COULD MAKE IT LIKE A  
23 MINUTE, WOULD BE VERY HELPFUL. SCOTT CARLIN, ANNELLO GRAJEADA,  
24 AND ANNELLO, WE KNOW THAT YOU'RE GOING TO BE MORE THAN...



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1 FRANCINE YOUNG. WOULD YOU COME FORWARD? ANNELLO, WOULD YOU  
2 LIKE TO BRING OTHER PEOPLE FROM THE UNION THERE WITH YOU TO --  
3

4 **ANNELLO GRAJEADA:** I THINK... [ Inaudible ]  
5

6 **SUP. BURKE, CHAIR:** AND WE COULD HAVE ONE PRESENTATION FROM THE  
7 UNION WOULD BE VERY HELPFUL, IF YOU COULD BRING THE PEOPLE UP  
8 WHO WERE PART OF THE UNION GROUP. AND IF YOU GIVE US YOUR  
9 NAME, WE'LL PULL THEM OUT OF THE LIST HERE. WHO WILL YOU BE  
10 CALLING -- DO YOU HAVE AS YOUR PRESENTATION?  
11

12 **ANNELLO GRAJEADA:** RICK OMANS, MARINA RODRIGUEZ, VIVIAN  
13 JOHNSON, DIANNE BANGAR, KATHLEEN AUSTRIA. I THINK THAT'S  
14 EVERYBODY.  
15

16 **SUP. BURKE, CHAIR:** ARE THEY ON THIS LIST? RIGHT.  
17

18 **ANNELLO GRAJEADA:** GOOD AFTERNOON, SUPERVISORS. MY NAME IS  
19 ANNELLO GRAJEADA, AND I'M THE GENERAL MANAGER OF SERVICE  
20 EMPLOYEES INTERNATIONAL UNION LOCAL 660. WE'RE HERE TODAY TO  
21 ADD OUR VOICES TO THE HUNDREDS OF PATIENTS AND ADVOCATES AND  
22 CARE PROVIDERS WHO'VE COME TO YOU TO URGE YOU TO RECONSIDER  
23 YOUR DECISION TO CLOSE RANCHO LOS AMIGOS. SEVERAL STUDIES WERE  
24 PRESENTED EARLIER THIS MONTH THAT OFFER SOME SERIOUS WARNINGS  
25 ABOUT THE CONSEQUENCES OF CLOSING THE REGION'S PREMIER REHAB



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1 SITE. A CALIFORNIA COMMUNITY FOUNDATION STUDY FINDS THAT THE  
2 CLOSURE OF RANCHO WOULD INCREASE THE REHABILITATION BED  
3 DEFICIT IN LOS ANGELES COUNTY TO 30%. THAT WOULD RESULT IN  
4 LONGER ACUTE CARE STAYS FOR AT-RISK PATIENTS IN THE COMMUNITY,  
5 BACKUPS IN EMERGENCY ROOMS FOR PATIENTS AWAITING BEDS WITH THE  
6 POTENTIAL INCREASE IN EMERGENCY ROOM DIVERSION DAYS AND DELAYS  
7 IN TREATMENT LEADING TO AN INCREASED NUMBER OF MEDICAL  
8 COMPLICATIONS WITH THE RESULTANT INCREASED COST. THERE WAS  
9 ANOTHER STUDY BY THE NATIONAL HEALTH FOUNDATION REPORT, AND  
10 THAT REPORT FINDS THAT IF RANCHO CLOSES, HUNDREDS OF PATIENT  
11 NEEDING THE REHABILITATION THAT THEY PROVIDE WILL BE UNABLE TO  
12 FIND BEDS. AND FINALLY, A STUDY BY BLUE CONSULTING,  
13 INCORPORATED THAT WAS COMMISSIONED BY YOUR BOARD RAISES  
14 SERIOUS QUESTIONS ABOUT ACTUAL COST SAVINGS THAT MAY OR MAY  
15 NOT RESULT FROM THE CLOSURE OF RANCHO. THE INITIAL DRAFT OF  
16 THE REPORT NOTED, AND I QUOTE, A SUBSTANTIAL PORTION OF THE  
17 COST TO KEEP RANCHO IN OPERATION ARE FIXED COSTS THAT COULD  
18 REMAIN LARGELY THE SAME EVEN IF RANCHO WERE TO CLOSE. WHEN  
19 COUNTY FIXED COST PROJECTIONS ARE CONSIDERED IN CONJUNCTION  
20 WITH THE COST OF INDIGENT CARE AND POTENTIAL REDUCED COSTS AT  
21 RANCHO UNDER VARIOUS SCENARIOS, THE RELATIVE COST OF PROVIDING  
22 CARE AT RANCHO BECOMES HIGHLY ADVANTAGEOUS. END QUOTE. THIS  
23 FINDING WAS ALTERED IN THE SUBSEQUENT DRAFTS TO REFLECT  
24 OPTIMISTIC ASSUMPTIONS ABOUT FUTURE SB 1255 FUNDS, BUT  
25 QUESTIONS ABOUT THE ACTUAL COST SAVINGS STILL ARE THERE. THE



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1 BLUE CONSULTING REPORT ALSO INCLUDES A BRIEF DISCUSSION OF  
2 SCENARIOS THAT KEEP RANCHO OPEN, A FOUNDATION MODEL, A QUASI  
3 GOVERNMENTAL ORGANIZATION MODEL AND THE TRANSFER OF RANCHO TO  
4 A DISTINCT PART UNIT OF ANOTHER COUNTY HOSPITAL. ALL OF THESE  
5 MODELS -- IN FACT, ANY CREDIBLE PROPOSAL THAT COULD POSSIBLY  
6 AVERT THE DISASTROUS CONSEQUENCES OF CLOSING RANCHO DESERVE  
7 SUBSTANTIVE DISCUSSION AND AN ANALYSIS. OUR UNION HAS RETAINED  
8 THE SERVICES OF MR. SPIVEY WHO WAS FORMER COUNSEL TO THE  
9 NATIONAL ASSOCIATION OF PUBLIC HOSPITALS TO ASSIST WITH THAT  
10 KIND OF AN ANALYSIS. WE KNOW THAT THE CLOSURE OF RANCHO WOULD  
11 BE A GREAT TRAGEDY FOR THOUSANDS OF PATIENTS AND THEIR  
12 FAMILIES AND FOR THE HEALTH AND WELL BEING OF LOS ANGELES  
13 COUNTY. WE ALSO KNOW THAT RANCHO IS REALLY SOMETHING SPECIAL,  
14 A CENTER OF EXCELLENCE AND INNOVATION, A COMMUNITY OF  
15 COMPASSION AND CARING. IT'S TAKEN OVER A CENTURY TO BUILD THIS  
16 INSTITUTION INTO WHAT IT IS TODAY, AND NO REPORTS OR STUDIES  
17 CAN REALLY MEASURE WHAT IS LOST IF WE LOSE RANCHO BECAUSE,  
18 REALLY, RANCHO IS IRREPLACEABLE. YOU HAVE A TOUGH DECISION TO  
19 MAKE TODAY. THE TESTIMONY BEFORE YOU HAS BEEN COMPELLING, AND  
20 WHAT WE URGE YOUR BOARD TO DO TODAY IS DON'T VOTE FOR CLOSURE  
21 OF RANCHO. WHAT WE URGE YOU TO DO TODAY, WHAT WE IMPORE YOU  
22 TO DO TODAY IS TO ALLOW THE FULL EXPLORATION OF EVERY POSSIBLE  
23 ALTERNATIVE TO KEEP RANCHO OPEN. THANK YOU FOR YOUR TIME. [  
24 Enthusiastic Cheers and Applause ]

25



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1    **SUP. BURKE, CHAIR:** NOW ARE EACH OF THE PEOPLE GOING TO SPEAK?

2

3    **RICH OMANS:** MY NAME IS RICH OMANS, I'M A IN-PATIENT PHYSICAL  
4    THERAPY SUPERVISOR AT L.A. COUNTY U.S.C. MEDICAL CENTER, AND I  
5    WOULD LIKE TO EXPRESS MY CONCERN REGARDING THE PROPOSED  
6    CLOSURE OF RANCHO LOS AMIGOS AND UP TO A HUNDRED BEDS AT THE  
7    MED CENTER. FOR THE MEDICAL CENTER TO BE EFFICIENT, THERE MUST  
8    BE EASY ACCESS FOR THE PEOPLE WHO NEED OUR SERVICE. THEN THERE  
9    MUST BE AN APPROPRIATE EXIT THAT REDUCES THE POSSIBILITY OF  
10   PATIENTS REUSING THE SYSTEM FOR THE SAME REASON OF THEIR  
11   RECENT ADMITTANCE. RANCHO IS A POSSIBLE DISCHARGE LOCATION FOR  
12   THOSE PATIENTS WHO CAN BENEFIT FROM INTENSIVE REHABILITATION.  
13   ITS CLOSURE, ALONG WITH THE CLOSURE OF REHAB SERVICES AT HIGH  
14   DESERT HOSPITAL EFFECTIVELY ELIMINATES THE POSSIBILITY OF  
15   SPECIALIZED REHABILITATION FOR PATIENTS WHO UTILIZE THEIR  
16   SYSTEM, UNLESS OF COURSE CONTRACT SERVICES ARE ESTABLISHED  
17   WHICH DO NOT NECESSARILY RESULT IN DECREASED COSTS. BESIDES  
18   THE OBVIOUS IMPACT ON THE PATIENTS WHO DO NOT RECEIVE THIS  
19   SERVICE, THERE IS AN IMPACT ON THE REMAINING HOSPITALS IN THE  
20   SYSTEM IF RANCHO IS TO CLOSE. DISCHARGE IS NECESSARY TO MAKE  
21   BEDS AVAILABLE FOR THE NEXT PATIENT WAITING IN THE EMERGENCY  
22   ROOM WILL BE DELAYED. THERE WILL BE AN INCREASED UTILIZATION  
23   OF SKILLED NURSING FACILITIES, NURSING HOMES AND HOME CARE.  
24   THESE SERVICES ARE NOT EQUIPPED TO HANDLE THE MAJOR  
25   REHABILITATION NEEDS OF PATIENTS ADMITTED TO RANCHO.



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1 CURRENTLY, THE COMMUNITY NURSING COORDINATORS WHO ARE  
2 RESPONSIBLE FOR SETTING UP HOME CARE FOR PATIENTS AT  
3 L.A.C./U.S.C. MEDICAL CENTER ARE ASKING THAT THE DISCHARGES BE  
4 HELD UP UNTIL THEY CAN ASSURE HOME CARE IS AVAILABLE. I  
5 ENVISION THAT THE PHYSICAL AND OCCUPATIONAL THERAPY STAFF AT  
6 L.A.C./U.S.C. WILL BE UTILIZED TO PROVIDE REHAB FOR THE  
7 PATIENTS WHO CANNOT GO TO RANCHO. CURRENTLY, PHYSICAL  
8 THERAPISTS AND OCCUPATIONAL THERAPISTS PRIORITIZE THEIR  
9 CASELOADS WITH THE GOAL OF DISCHARGING THE PATIENTS AS SOON AS  
10 POSSIBLE. OUR GOAL IS TO PROVIDE A SAFE DISCHARGE THAT  
11 INCLUDES PROPER PATIENT AND CARE GIVER TRAINING AND THE  
12 PROVISION OF APPROPRIATE EQUIPMENT SUCH AS WHEELCHAIRS AND  
13 HOSPITAL BEDS. WE TRY TO MINIMIZE THE REUSE OF THE SYSTEM FOR  
14 THE SAME REASON THAT THESE PATIENTS WERE ADMITTED FOR. ARE WE  
15 SUCCESSFUL? I THINK SO BUT OUR SUCCESS IS HARD FOUGHT. SINCE  
16 '94/'95 FISCAL YEAR THE NUMBER OF IN-PATIENT REFERRALS THAT  
17 PHYSICAL THERAPY HAS RECEIVED HAS INCREASED 36%. THIS IS IN  
18 LIGHT OF DECREASING PATIENT CENSUS SINCE '94/'95 FISCAL YEAR  
19 AS WELL AS THE INCREASE IN THE AVERAGE LENGTH OF STAY.  
20 PATIENTS NOW HAVE MORE ACUTE PROBLEMS AT THE TIME OF DISCHARGE  
21 AND REQUIRE MORE SERVICES AT THE TIME OF DISCHARGE. OF THE  
22 PATIENTS SCHEDULED TO BE TREATED, PHYSICAL THERAPY AND  
23 OCCUPATIONAL THERAPY ARE PROVIDING THERAPY FOR ONLY  
24 APPROXIMATELY 68% OF THE IN-PATIENTS. THAT MEANS THAT ON A  
25 DAILY BASIS, WE ARE CURRENTLY UNABLE TO SEE ONE-THIRD OF THE



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1 PATIENTS THAT WE SHOULD BE SEEING. NOT ONLY WILL WE BE  
2 PROVIDING TIME-CONSUMING REHAB FOR THOSE PATIENTS THAT AREN'T  
3 BEING ADMITTED TO RANCHO, WE WILL BE ATTEMPTING TO QUICKLY  
4 DISCHARGE THOSE PATIENTS TO PROVIDE SPACE FOR THE PATIENTS  
5 WAITING IN THE EMERGENCY ROOM. I FEEL THAT RANCHO'S CLOSURE  
6 AND THE ELIMINATION OF A HUNDRED BEDS WILL MAKE AN ALREADY  
7 DIFFICULT SITUATION WORSE. I APPRECIATE YOUR TIME.

8

9 **SUP. KNABE:** THANK YOU. NEXT?

10

11 **VIVIAN JOHNSON:** HELLO. MY NAME IS VIVIAN JOHNSON, I'M A  
12 NURSING ATTENDANT AT MARTIN LUTHER KING HOSPITAL, AND I'M HERE  
13 TO TALK ABOUT THE CLOSURE OF RANCHO. RANCHO IS VERY IMPORTANT  
14 TO MARTIN LUTHER KING. WE SEND A LOT OF OUR PATIENTS OVER  
15 THERE THAT WAS TOLD THAT THEY WOULD NEVER WALK AGAIN, AND  
16 THANKS TO RANCHO, THEY ARE WALKING RIGHT NOW TO THIS DAY.  
17 CLOSING RANCHO ALSO WOULD NOT BE COST EFFECTIVE. THE PATIENTS  
18 WILL STILL NEED REHAB, SO THAT A PRIVATE FACILITY WOULD BE  
19 VERY COSTLY, AND LONG-TERM CONVALESCENT CARE COSTS EVEN MORE,  
20 AND CONVALESCENT CARE IS NOT REHABILITATION. I HAD A PATIENT,  
21 A VERY YOUNG PATIENT, WITH A SPINAL CORD INJURY FROM A G.S.W.,  
22 WHICH IS A GUNSHOT WOUND. HE HAD PRACTICALLY JUST GAVE UP ON  
23 LIFE, BUT THANKS TO RANCHO, HE'S NOW INDEPENDENT, HE CAN TAKE  
24 CARE OF HIMSELF, HE DOES NOT HAVE TO DEPEND ON OTHERS, AND  
25 HE'S VERY, VERY PRODUCTIVE. EXCUSE ME, OUR COMMUNITY REALLY





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1 NEEDS RANCHO, NOT JUST OUR COMMUNITY. RANCHO IS THE BEST THERE  
2 IS OUT HERE IN THE UNITED STATES OF AMERICA, AND WE ALL  
3 RECOGNIZE IT AND I HOPE YOU ALL DO, TOO. THANK YOU.

4

5 **SUP. KNABE:** THANK YOU, NEXT?

6

7 **MARIA RODRIGUEZ:** GOOD AFTERNOON MY NAME IS MARIA RODRIGUEZ,  
8 I'M A COUNTY EMPLOYEE, I WORK FOR HARBOR-U.C.L.A. MEDICAL  
9 CENTER, THE EMERGENCY DEPARTMENT. THIS IS NOT JUST ABOUT  
10 RANCHO, OR L.A.C./U.S.C. IT'S ABOUT HOW THESE CUTS AFFECT THE  
11 ENTIRE SYSTEM. AT HARBOR-U.C.L.A. MEDICAL CENTER, WE ARE  
12 ALREADY FACING THE IMPACT OF THE CLOSURES OF THE COUNTY  
13 CLINICS. OUR HALLWAYS ARE CROWDED WITH PATIENTS WHO HAVE TO  
14 WAIT HOURS TO BE SEEN AND TO GET THE PROPER CARE. OUR  
15 EMERGENCY ROOM IS BURSTING AT ITS SEAMS. CLOSING THE CLINICS  
16 HAVE CAUSED SEVERE HARDSHIP, AND OVERCROWDING IN THE REMAINING  
17 FACILITIES. CLOSING BEDS AT U.S.C., L.A.C. WILL DENY CRITICAL  
18 CARE FOR HUNDREDS OF PATIENTS AND WILL LEAD TO UNNECESSARY  
19 DEATH. IF YOU VOTE TO CLOSE RANCHO, WHERE WILL THESE PATIENTS  
20 GO? YOU ARE NOT GOING TO SAVE MONEY. THE COUNTY WILL STILL BE  
21 RESPONSIBLE FOR THE COST. YOU WILL SIMPLY REMOVE THE PATIENTS'  
22 OPPORTUNITY TO BECOME SELF-SUFFICIENT. YOU WILL CONDEMN THEM  
23 TO BEING WAREHOUSED IN NURSING HOMES WHERE THEY WILL SPEND THE  
24 REST OF THEIR LIVES AND THE COUNTY WILL CONTINUE TO PAY FOR  
25 THEIR COST. RANCHO LOS AMIGOS IS THE ONLY FACILITY OF ITS OWN



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1 CALIBER WEST OF THE MISSISSIPPI. THE DEDICATED STAFF THERE  
2 HAVE CONTINUED TO WORK MIRACLES, IMPROVING THE LIVES OF  
3 THOUSANDS OF COUNTY RESIDENTS AND SAVING LIVES, AND I LEAVE  
4 YOU WITH THIS QUOTE. "THE ROLE OF A LEADER IS TO LEAD AND  
5 BUILD, NOT TO DESTROY." THANK YOU.

6

7 **SUP. KNABE:** THANK YOU. [ Applause ]

8

9 **SUP. KNABE:** DIANNE AND KATHLEEN. AND THEN -- IS SCOTT CARLAN  
10 STILL HERE? NO? FRANCINE YOUNG? SARAH KELLY? IS SARAH HERE?  
11 REUBEN HERNANDEZ. BROTHER RICHARD? GO AHEAD.

12

13 **DIANE BANGER:** HONORABLE BOARD OF SUPERVISORS, MY NAME IS DIANE  
14 BANGER, I'M A SPEECH PATHOLOGIST AT RANCHO. BUDGET CUTS FOR  
15 TODAY ARE TEMPORARY REMEDIES. RANCHO'S STAFF AND PROGRAMS ARE  
16 HIGHLY SOPHISTICATED SERVICES, AND ONCE THE PRESCRIPTION FOR  
17 THESE SERVICES IS DENIED, THERE IS NO PILL ON THE MARKET WHICH  
18 WILL ENABLE THE DISABLED. LET'S SATISFY MANY PEOPLE AND SAVE  
19 MONEY AT THE SAME TIME. RANCHO IS USED TO BEING A LEADER.  
20 LET'S PUT RANCHO IN THE LEAD POSITION OF HEALTHCARE REFORM.  
21 LET'S START IT IN L.A. COUNTY. THE CONSEQUENTIAL CIRCUMSTANCES  
22 OF DISABILITIES GET PLAYED OUT AT RANCHO ON A DAILY BASIS.  
23 MORE THAN HALF OF MY OUTPATIENTS WORK AND PAY TAXES. OTHERS  
24 ARE AVID VOLUNTEERS, BEING GROOMED TO SEEK JOBS IN THE NEAR  
25 FUTURE, SOME IN PROFESSIONAL POSITIONS. THE EMOTIONAL TRAUMA



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1 OF THESE PENDING CUTS HAVE REPEATEDLY COME UP IN TREATMENT  
2 SESSIONS. THE MAJORITY OF PATIENTS WILL LET YOU KNOW, RANCHO  
3 SHOULD HAVE BEEN THEIR FIRST STOP INSTEAD OF THEIR LAST. ONCE  
4 PRIVATE INSURANCE DOLLARS GET USED UP, PRIVATE INDUSTRY NO  
5 LONGER HAS A PLACE FOR ANY OF US WITHOUT HEALTH INSURANCE. WE  
6 NEED HEALTHCARE REFORM. LET'S PUT RANCHO AT THE BEGINNING AND  
7 AT THE TOP OF EVERYBODY'S LIST.

8

9 **SUP. KNABE:** THANK YOU. [ Applause ]

10

11 **SUP. KNABE:** BRIAN -- EXCUSE ME. BRIAN SCHAEETER. BRIAN HERE?  
12 DEVIN WALLACE. OKAY. COME ON FORWARD. MARY WILLIAMS. MARY  
13 HERE? YOLANDA VERA. IS YOLANDA HERE? COME ON FORWARD. GO  
14 AHEAD.

15

16 **KATHLEEN AUTREY:** MY NAME IS KATHLEEN AUTREY, PARDON MY VOICE.  
17 RANCHO LOS AMIGOS IS INTEGRAL TO THE TRAUMA NETWORK AND MUST  
18 REMAIN SO. PATIENTS SUFFERING THE MOST TRAUMATIC ILLNESS OR  
19 INJURY MUST BE GIVEN THE OPPORTUNITY TO ATTAIN OR REGAIN  
20 FUNCTIONAL ABILITIES AND INDEPENDENCE. PATIENTS MUST NOT BE  
21 ALLOWED TO LANGUISH IN NURSING HOMES OR REPEATEDLY FORCED INTO  
22 THE E.R.s. RANCHO MUST BE KEPT OPEN AND ACCESS INCREASED TO  
23 ALL THOSE WHO NEED IT, INSURED AND UNINSURED ALIKE. ACUTE IN-  
24 PATIENT REHABILITATION TREATMENT IS THE NEXT STEP FOR THE MOST  
25 INJURED OF TRAUMA PATIENTS. COMPLETE ELIMINATION OF THESE



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1 SERVICES OR CONTRACTING OUT THESE SERVICES BY THE COUNTY IS  
2 NOT COST EFFECTIVE, AND IS AS DEADLY AS ELIMINATING TRAUMA  
3 SERVICES. THANK YOU.

4

5 **SUP. KNABE:** THANK YOU GO AHEAD.

6

7 **SARAH KELLY:** MY NAME IS SARAH KELLY, AND I'M AN OCCUPATIONAL  
8 THERAPIST. I WAS EMPLOYED AT RANCHO FOR ALMOST 20 YEARS, AND  
9 I'M CURRENTLY A MEMBER OF THE FACULTY AT U.S.C. I'M ALSO THE  
10 MOTHER OF JULIE KELLY, WHO HAS BEEN A PATIENT AT RANCHO SINCE  
11 SHE WAS 14 MONTHS OF AGE. SHE'S NOW 35. JULIE HAS CEREBRAL  
12 PALSY AND SPINA BIFIDA. BOTH CONDITIONS WERE DIAGNOSED AT  
13 RANCHO. CEREBRAL PALSY AT AGE 14 MONTHS AND SPINA BIFIDA AT  
14 AGE 7. AND I'VE ALWAYS BEEN GRATEFUL THAT JULIE WAS ABLE TO  
15 HAVE THE SPECIALIZED SERVICES SHE NEEDED AT RANCHO. OUR HEALTH  
16 INSURANCE WOULD HAVE COVERED SERVICES FOR JULIE AT ANY  
17 FACILITY, BUT RANCHO WAS THE ONLY ONE I WOULD HAVE CONSIDERED  
18 IF SHE WAS TO BECOME THE INDEPENDENT ADULT SHE IS TODAY. AT  
19 ONE POINT, I GAVE THE COMMUNITY A TRY WHEN JULIE REACHED  
20 SCHOOL AGE AND WAS HAVING NEUROLOGICAL PROBLEMS. I FOUND THE  
21 VERY BEST CHILDREN'S NEUROLOGIST THAT I COULD, AND AFTER  
22 SEVERAL MONTHS OF HIS DIRECTION AN INTERVENTION AT RANCHO  
23 BROUGHT TO LIGHT THE FACT THAT, IN ADDITION TO C.P., JULIE  
24 ALSO HAD AN ABNORMALLY DEVELOPED SPINAL CORD, SPINA BIFIDA,  
25 WHICH EXPLAINED HER PROBLEM, AND THAT HER PROBLEM NEEDED TO BE



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1   ADDRESSED IN A TOTALLY DIFFERENT MANNER. IN FACT, THE  
2   DIRECTION WE HAD BEEN GIVEN PREVIOUSLY WAS HARMFUL. INSTEAD,  
3   SHE REQUIRED IMMEDIATE SURGERY TO RELEASE THE SPINAL CORD AND  
4   PREVENT LOSS OF BOWEL FUNCTION AND FURTHER MOTOR LOSS THAT  
5   COULD HAVE SEVERELY IMPAIRED HER. THE ORIGINAL NEUROLOGIST,  
6   THOUGH A LEADING SPECIALIST, DID NOT HAVE THE KNOWLEDGE AND  
7   EXPERIENCE TO ACCURATELY DIAGNOSE AND TREAT JULIE'S PROBLEM.  
8   RANCHO DID. THIS IS ONE MORE EXAMPLE OF WHY WE NEED RANCHO.  
9   THERE'S NOWHERE ELSE IN THE COMMUNITY THAT WAS OR IS PREPARED  
10  TO HELP ALL THE AREAS THAT NEEDED TO BE ADDRESSED, HER  
11  ORTHOPEDIC PROBLEMS, HER BOWEL AND BLADDER PROBLEMS, THE  
12  SPECIALIZED THERAPY SHE NEEDED INITIALLY IN HER EARLY  
13  DEVELOPMENT, AND FOLLOWING THE MANY SURGERIES AND PRESSURE  
14  AREAS THAT DEVELOPED THEREAFTER. IN RECENT YEARS, JULIE HAS  
15  DEVELOPED PAIN PROBLEMS. SHE NEEDED A SURGICAL PROCEDURE THAT  
16  WOULD NOT BE AT ALL FAMILIAR TO AN ORTHOPEDIST WHO HAS NOT  
17  DEALT WITH NUMEROUS SIMILAR CONDITIONS. HE WOULD PROBABLY HAVE  
18  GIVEN HER PAIN PILLS AND THROWN UP HIS HANDS. FORTUNATELY,  
19  JULIE RECEIVED THE SURGICAL CARE SHE NEEDED TO BE ABLE TO  
20  CONTINUE HER LIFE WITHOUT BEING IN CONSTANT PAIN. RANCHO ALSO  
21  MADE THIS POSSIBLE. I'M VERY CONCERNED FOR HER AS WELL AS FOR  
22  THE HUNDREDS OF OTHER PERSONS WHO DEPEND ON THE UNIQUE  
23  SERVICES OF RANCHO TO HELP THEM THROUGH LIFE. IF RANCHO WERE  
24  TO CLOSE, EVEN IF FINANCES WERE NOT AN ISSUE, WHERE WILL THEY  
25  GO? IT'S JUST NOT AN OPTION TO CLOSE RANCHO AND I CAN'T



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1 BELIEVE YOU'RE WILLING TO TAKE RESPONSIBILITY FOR WHAT WOULD  
2 BE A HISTORICAL ACT THAT WOULD IRREVOCABLY CHANGE THE HEALTH  
3 AND WELFARE OF PERSONS WHO NEED AND DESERVE IT.

4

5 **SUP. KNABE:** THANK YOU. AND YOLANDA. RIGHT?

6

7 **BARBARA FRANKEL:** BARBARA FRANKEL FOR YOLANDA VERA.

8

9 **SUP. KNABE:** OKAY, AND THEN MOLLY DOYLE, IS MOLLY DOYLE STILL  
10 HERE? COME ON FORWARD.

11

12 **DEVIN WALLACE:** HELLO. I'M DEVIN WALLACE, AND I'M THE DIRECTOR  
13 OF EDUCATION OF THE STROKE ASSOCIATION OF SOUTHERN CALIFORNIA,  
14 AND I'M HERE SPEAKING TODAY ON BEHALF OF THE THOUSANDS OF  
15 STROKE SURVIVORS THROUGHOUT THE COUNTY AND ALSO THE MUCH  
16 LARGER DISABILITY COMMUNITY. I APPRECIATE THE OPPORTUNITY TO  
17 TALK HERE TODAY. AFTER ALL YOU'VE HEARD FROM ALL OF THESE  
18 PEOPLE REPRESENTING THOUSANDS AND THOUSANDS OF DISABLED PEOPLE  
19 THROUGHOUT THE COUNTY AND SCORES OF HEALTHCARE PROFESSIONALS,  
20 THE ONLY WAY YOU CAN VOTE TO CLOSE RANCHO LOS AMIGOS TODAY AND  
21 SLEEP AT NIGHT IS TO MAINTAIN A STATE OF DENIAL. THE DENIAL  
22 ALLOWS YOU TO CONVINCE YOURSELVES THAT IF RANCHO CLOSES,  
23 SOMEHOW, SOMEWHERE, IN THE COUNTY, THESE PEOPLE ARE STILL  
24 GOING TO GET THE CARE THAT WILL KEEP THEM ALIVE AND GIVE THEM  
25 QUALITY OF LIFE. THIS DENIAL IS SOMEWHAT UNDERSTANDABLE. AFTER



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1 ALL, WE KNOW THAT THERE ARE BACKUP SYSTEMS IN AMERICA. RIGHT?  
2 I MEAN, WE'RE A COUNTRY THAT TAKES CARE OF ITS PEOPLE, ONE WAY  
3 OR ANOTHER. SOMEWHERE, SOMEBODY WILL PICK UP THE SLACK SO WE  
4 CAN PASS ON THE PROBLEM TODAY TO THE NEXT GUY TO SOLVE IT  
5 BECAUSE AMERICA WILL NOT REALLY LET SO MANY PEOPLE FALL  
6 THROUGH THE CRACKS, WILL IT? WELL, NOW, HONORABLE  
7 REPRESENTATIVES, YOU CAN SEE BY THIS EXHAUSTIVE TESTIMONY THAT  
8 THE CRACKS ARE SO BIG THAT YOU CANNOT, IN AN INTELLIGENT  
9 FASHION, MAINTAIN THAT STATE OF DENIAL. AS THE EXPERTS HAVE  
10 TOLD YOU, THERE ARE NO REAL BACKUPS HERE. MANY, MANY OF THESE  
11 PEOPLE WILL SUFFER OR DIE. CAN THAT REALITY BREAK THROUGH THIS  
12 SENSE OF DENIAL? LET US HOPE SO. LET US HOPE THAT YOU CAN SEE  
13 NOW AND ACCEPT REALITY AND COMMIT YOURSELVES WITH YOUR FULL  
14 INTELLIGENCE, AND I KNOW THAT THAT IS A STRONG INTELLIGENCE,  
15 TO FIND SOME WAY TO KEEP THIS PRICELESS FACILITY ALIVE. THANK  
16 YOU FOR THE OPPORTUNITY TO TALK. [ Enthusiastic Cheers and  
17 Applause ].

18

19 **SUP. KNABE:** THANK YOU. IS, EXCUSE ME, JANET MORRIS, IS JANET  
20 STILL HERE? OKAY JANET, COME ON FORWARD, PLEASE. GO AHEAD.

21

22 **BARBARA FRANKEL:** MY NAME IS BARBARA FRANKEL, I'M TESTIFYING ON  
23 BEHALF OF YOLANDA VERA, I AM FROM NEIGHBORHOOD LEGAL SERVICES  
24 OF LOS ANGELES COUNTY HEALTH CONSUMER CENTER. WE ARE  
25 SUBMITTING INTO THE RECORD TODAY NINE BINDERS OF TESTIMONY,





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1   REPORTS AND STUDIES REGARDING THE POTENTIAL IMPACT OF THE  
2   COUNTY'S PROPOSAL TO CUT ADDITIONAL COUNTY HEALTH SERVICES.  
3   THIS TESTIMONY REPRESENTS THE COLLECTIVE EFFORTS OF MANY  
4   COMMUNITY-BASED ORGANIZATIONS, DEDICATED PROVIDERS, COURAGEOUS  
5   PATIENTS AND CONSUMER ADVOCATES FROM NEIGHBORHOOD LEGAL  
6   SERVICES, LEGAL AID FOUNDATION OF LOS ANGELES, AMERICAN CIVIL  
7   LIBERTIES UNION, PROTECTION AND ADVOCACY, WESTERN CENTER ON  
8   LAW AND POVERTY AND WESTERN CENTER ON LAW AND DISABILITY  
9   RIGHTS. IN THESE BINDERS, WE ARE THE VOICES OF LOS ANGELES  
10  COUNTY CITIZENS WHO CARE DEEPLY ABOUT OUR HEALTHCARE SYSTEM.  
11  PLEASE HEED THEIR VOICES.

12

13  **SUP. YAROSLAVSKY:** IS EACH OF THOSE THE SAME?

14

15  **BARBARA FRANKEL:** NO, SUPERVISOR, THIS IS ONE SET, WE'VE  
16  ALREADY SUBMITTED ONE SET.

17

18  **SUP. YAROSLAVSKY:** WHEN WAS THAT PREPARED?

19

20  **BARBARA FRANKEL:** OVER THE LAST -- SINCE THE BEILENSON NOTICE  
21  WAS PLACED INTO THE RECORD.

22

23  **SUP. YAROSLAVSKY:** WHICH IS FOURTEEN DAYS AGO?

24



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1 **BARBARA FRANKEL:** TWO WEEKS AGO. WITHIN THE LAST TWO WEEKS. WE  
2 WERE BEGINNING TO PREPARE IT IN ADVANCE.

3

4 **SUP. YAROSLAVSKY:** AND THIS IS THE EARLIEST TIME YOU COULD  
5 PROVIDE IT TO US? DID YOU PROVIDE US WITH COPIES OF IT?

6

7 **BARBARA FRANKEL:** YES. THERE'S ONE IN THE OFFICE. SOME OF THE  
8 DECLARATIONS DIDN'T GET TO US.

9

10 **SUP. YAROSLAVSKY:** WHAT OFFICE?

11

12 **BARBARA FRANKEL:** RIGHT HERE AT THE BOARD OF SUPERVISOR OFFICE  
13 DOWNSTAIRS.

14

15 **SUP. YAROSLAVSKY:** I'D LIKE TO HAVE A SET OF THEM SO I COULD  
16 START REVIEWING THEM.

17

18 **BARBARA FRANKEL:** I WOULD BE VERY HAPPY TO PROVIDE EACH  
19 SUPERVISOR IF YOU WOULD LIKE A SET OF THESE BINDERS.

20

21 **SUP. YAROSLAVSKY:** CAN WE ASK THE EXECUTIVE OFFICER TO HAVE  
22 THEM HERE SO WE CAN REVIEW THEM WHILE TESTIMONY IS GOING ON?

23

24 **BARBARA FRANKEL:** YEAH I WILL NOTE THAT BECAUSE OF THE LATE  
25 SUBMISSION OF SOME OF THESE DECLARATIONS, WE HAD TO CREATE AN



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1    ADDENDUM BECAUSE OF SOME OF THEM CAME IN LATE LAST NIGHT. LOS  
2    ANGELES COUNTY'S INSURED AND UNINSURED RESIDENTS HAVE LOST 16  
3    PRIVATE HOSPITALS, 16 HOSPITAL-BASED EMERGENCY ROOMS, 10  
4    HOSPITAL-BASED TRAUMA CENTERS AND APPROXIMATELY 2,800 BEDS IN  
5    THE LAST 10 YEARS. IN OCTOBER 2002, THE BOARD ELIMINATED  
6    APPROXIMATELY ONE-HALF A MILLION AMBULATORY CARE VISITS AS IT  
7    CLOSED 11 HEALTH CENTERS AND CUT VITAL SERVICES PROVIDED BY  
8    OUR PUBLIC/PRIVATE PARTNERSHIP CLINICS AMONG OTHER REDUCTIONS.  
9    THE TESTIMONY IN THESE BINDERS AND THE TESTIMONY BEFORE THIS  
10    BOARD TODAY SHOWS THAT WE HAVE BEEN CUT TO THE BONE. ALL THE  
11    COUNTY FACILITIES ARE OPERATING FAR BEYOND FULL CAPACITY.  
12    PATIENTS WITH SEVERE DISEASES WAIT FOR WEEKS AND MONTHS TO GET  
13    APPOINTMENTS AND PRESCRIPTIONS, URGENT CARE PATIENTS WAIT IN  
14    GURNEYS IN THE HALLWAY, PRIVATE AND PUBLIC EMERGENCY ROOMS ARE  
15    FILLED WITH SICK PATIENTS WHO CANNOT GET THE MEDICALLY  
16    NECESSARY CARE ANYWHERE ELSE. EVERYONE IS AT RISK. THE BOARD  
17    CERTAINLY FACES A DIFFICULT TASK. IT HAS BEEN GIVEN THE  
18    OBLIGATION TO BE THE HEALTHCARE PROVIDER OF LAST RESORT  
19    WITHOUT THE AUTHORITY THAT THE STATE AND FEDERAL GOVERNMENTS  
20    HAVE TO RAISE ADDITIONAL REVENUES. THE BOARD'S EFFORTS BEHIND  
21    MEASURE B ARE DEFINITELY TO BE COMMENDED AND APPRECIATED, BUT  
22    THE COUNTY IS NOW PROPOSING TO TEAR DOWN THE SYSTEM FAR BEYOND  
23    THE POINT WHERE IT CAN EVER BE REVIVED OR REBUILT. I RECENTLY  
24    HEARD FORMER PRESIDENT CLINTON SPEAK AT A CONFERENCE, AND I



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1 SHARE WITH YOU HIS ADVICE. WHEN YOU FIND YOURSELF IN A HOLE,  
2 STOP DIGGING. [ Applause ]

3

4 **BARBARA FRANKEL:** THE VOTERS, THE CITIZENS, PROVIDERS, PATIENTS  
5 AND ADVOCATES WHO ARE DEVOTING THEIR TIME, MONEY AND ENERGY  
6 PROVIDING TESTIMONY HAVE SHOWN THAT WE ARE ALL WILLING TO ROLL  
7 UP OUR SLEEVES TO DO WHAT WE CAN TO UNDERSTAND THE CRISIS AND  
8 TO WORK ON SOLUTIONS TO SAVE OUR HEALTHCARE SYSTEM. THE CHECK  
9 IS NOT BOUNCING TOMORROW. THE DISCUSSIONS WITH FEDERAL AND  
10 STATE DECISION MAKERS ARE NOT YET COMPLETED. WE URGE YOU TO  
11 AVOID FURTHER CLOSING OF THE COUNTY HEALTHCARE SAFETY NET.  
12 LIVES HANG IN THE BALANCE. THANK YOU VERY MUCH AND I WOULD  
13 VERY MUCH LIKE TO SUBMIT THIS INTO THE RECORD. [ Applause ]

14

15 **SUP. BURKE, CHAIR:** NOW THESE ARE DECLARATIONS OF INDIVIDUALS  
16 OR?

17

18 **BARBARA FRANKEL:** THEY ARE PATIENTS, THERE ARE MANY PHYSICIANS  
19 AT COUNTY FACILITIES, THERE ARE PHYSICIANS FROM OUTSIDE THE  
20 COUNTY, THERE ARE REPORTS, THERE'S ALSO CORRESPONDENCE BETWEEN  
21 THE COUNTY AND OTHER ORGANIZATIONS AS WELL AS LETTERS TO THE  
22 COUNTY FROM VARIOUS ORGANIZATIONS. IF ANY SUPERVISOR WOULD  
23 LIKE THEIR OWN COPY, WE WOULD BE HAPPY TO PROVIDE IT. LAST  
24 TIME WE PROVIDED EVERYBODY WITH COPIES AND WE WEREN'T SURE



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1 THAT EVERYBODY WANTED THEM, BUT I'D BE VERY HAPPY TO HAVE IT  
2 COPIED.

3

4 **SUP. BURKE, CHAIR:** WELL, IF THERE'S ONE COPY, OUR OFFICE CAN  
5 ROTATE THE COPY THAT YOU PROVIDE TO THE EXECUTIVE OFFICER. I  
6 WOULDN'T WANT TO ASK YOU TO HAVE TO REDO ALL OF THOSE, AND I  
7 THINK SUPERVISOR YAROSLAVSKY SAID HE --

8

9 **BARBARA FRANKEL:** I'D BE VERY HAPPY TO PROVIDE IT.

10

11 **SPEAKER:** SUPERVISOR BURKE, IF I CAN JUST SAY THAT THERE WAS  
12 ACTUALLY A SET OF THOSE DOCUMENTS DELIVERED TO THE EXECUTIVE  
13 OFFICE THIS MORNING. WE SPENT THE LAST SEVERAL HOURS REVIEWING  
14 THEM. MOST OF THEM ARE ACTUALLY DOCUMENTS THAT HAVE BEEN  
15 PRODUCED BY THE COUNTY OR SHARED WITH THE COUNTY OR ALREADY  
16 CONSIDERED BY THE COUNTY. THERE ARE NUMEROUS DECLARATIONS, AS  
17 MISS FRANKEL SAID FROM PATIENTS, AND THE DEPARTMENT HAS  
18 REVIEWED ALL THOSE AT THIS POINT.

19

20 **SPEAKER:** THANK YOU.

21

22 **MOLLY DOYLE:** MY NAME IS MOLLY DOYLE. THANK YOU FOR THE  
23 OPPORTUNITY TO SPEAK. I ALSO HAVE A WRITTEN DECLARATION TO  
24 SUBMIT. I AM A SPEECH THERAPIST AT RANCHO AND PART OF THE  
25 CLINICAL TEAM THAT EVALUATES AND TEACHES PATIENTS TO USE



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1 ASSISTIVE TECHNOLOGY. YOU'VE ALL SEEN MANY EXAMPLES OF  
2 ASSISTIVE TECHNOLOGY TODAY. CLIENTS IN POWERED WHEELCHAIRS,  
3 PATIENTS UNABLE TO SPEAK RELYING ON COMMUNICATION DEVICES. AS  
4 YOU KNOW, THE PATIENTS WE SERVE AT RANCHO HAVE THE MOST SEVERE  
5 DISABILITIES: SPINAL CORD INJURIES, TRAUMATIC BRAIN INJURIES,  
6 LOU GEHRIG'S DISEASE OR A.L.S. TYPICALLY THESE PATIENTS HAVE  
7 MULTIPLE TECHNOLOGY NEEDS AND REQUIRE AN INTEGRATED TEAM  
8 APPROACH IN ORDER TO ENSURE THE EQUIPMENT IS COMPATIBLE AND  
9 WORKS PROPERLY. THIS PROGRAM IS PRIMARILY FUNDED BY THE  
10 COUNTY. HOWEVER, RANCHO HAS BEEN SUCCESSFUL OVER THE LAST  
11 SEVERAL YEARS IN GETTING OUTSIDE FUNDING THROUGH LOS FERISTOS  
12 AND OUTSIDE GRANTS IN ORDER TO SUPPORT THE PROGRAM. THIS  
13 TECHNOLOGY AND THE ASSOCIATED SERVICES WE PROVIDE AT RANCHO  
14 ARE MEDICALLY NECESSARY AND ARE REQUIRED IN ORDER FOR PATIENTS  
15 TO BE INDEPENDENT, LIVE AT HOME, AND RETURN TO WORK. THERE IS  
16 A RANGE OF TECHNOLOGY AVAILABLE, SIMPLE TO COMPLEX. SOME ITEMS  
17 COST A FEW DOLLARS. OTHER ITEMS COULD COST SEVERAL THOUSAND.  
18 IT'S ONLY RANCHO WHERE THERE'S THE CLINICAL EXPERTISE TO MATCH  
19 THE RIGHT EQUIPMENT TO THE NEEDS AND SKILLS OF THE PATIENT.  
20 BECAUSE WE ARE FAMILIAR WITH THE RANGE OF TECHNOLOGY  
21 AVAILABLE, WE OFTEN CAN IDENTIFY LESS COSTLY SOLUTIONS FOR  
22 PATIENTS. THESE SERVICES AND EQUIPMENT ARE REIMBURSABLE BY  
23 VARIOUS PAYORS ASSUMING PATIENTS ARE ELIGIBLE. Medi-Cal,  
24 MEDICARE, REGIONAL CENTERS, ET CETERA. EACH OF COURSE WITH  
25 DIFFERENT CRITERIA. IT'S ONLY AT RANCHO THAT WE HAVE THE



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1 EXPERTISE TO PREPARE THE DOCUMENTATION FOR THESE DIFFERENT  
2 PAYORS TO ENSURE PATIENTS GET THE APPROPRIATE EQUIPMENT IN A  
3 TIMELY MANNER. THESE SERVICES THAT RANCHO PROVIDES ARE NOT  
4 AVAILABLE ANYWHERE ELSE IN THE COUNTY, EITHER PUBLIC OR  
5 PRIVATE. IF RANCHO CLOSES, OUR COMMUNITY LOSES A CRITICAL  
6 RESOURCE. NOT ONLY DO THE INDIGENT SUFFER, BUT ALSO THOSE ON  
7 Medi-Cal. THE INDIGENT WILL NOT RECEIVE THE EQUIPMENT WHICH IS  
8 MEDICALLY NECESSARY AND REQUIRED IN ORDER TO LIVE  
9 INDEPENDENTLY. PATIENTS ON Medi-Cal MAY RECEIVE SOME  
10 EQUIPMENT. HOWEVER, BECAUSE THERE IS NO COMPARABLE EXPERTISE  
11 IN THE COMMUNITY, THESE PATIENTS ARE AT RISK OF RECEIVING  
12 EQUIPMENT THAT MAY BE INAPPROPRIATE OR PLACES THEM AT RISK FOR  
13 FURTHER INJURY. IN THE END, I THINK THE COUNTY FACES HIGHER  
14 COSTS BY NOT PROVIDING THESE SERVICES. I URGE YOU TO  
15 RECONSIDER YOUR DECISION REGARDING CLOSURE. THANK YOU. [  
16 Applause ].

17

18 **SUP. BURKE, CHAIR:** JANET MORRIS.

19

20 **ANDREA VAN HOOK:** HI, JANET MORRIS ACTUALLY HAD TO LEAVE, MY  
21 NAME IS ANDREA VAN HOOK AND I'M SUBMITTING HER TESTIMONY ON  
22 HER BEHALF, I'M ALSO SUBMITTING TESTIMONY ON BEHALF OF PETER  
23 BROWN, WHO ALSO HAD TO LEAVE. MY NAME IS ANDREA VAN HOOK. I'M  
24 WITH THE ALZHEIMER'S ASSOCIATION OF LOS ANGELES RIVERSIDE AND  
25 SAN BERNARDINO COUNTIES. IN ADDITION TO ALL THE WONDERFUL WORK





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1 THAT RANCHO LOS AMIGOS DOES IT IS ALSO A CENTER FOR  
2 ALZHEIMER'S DISEASE AND DEMENTIA DISORDERS, IT PROVIDES  
3 CRITICAL TREATMENT, CARE AND DIAGNOSIS FOR OVER 1,600 PEOPLE  
4 ANNUALLY WITH ALZHEIMER'S DISEASE AND DEMENTIA DISORDERS. BY  
5 CLOSING THE CENTER, LOS ANGELES COUNTY WILL LOSE APPROXIMATELY  
6 OVER HALF A MILLION DOLLARS A YEAR IN FEDERAL AND STATE GRANT  
7 MONEY, WHICH IS JUST FOR ALZHEIMER'S DISEASE. THIS MONEY  
8 INCLUDES CLINICAL SERVICES. SO I WOULD URGE THE BOARD OF  
9 SUPERVISORS TO FIND OUT EXACTLY HOW MUCH OF THE GRANT MONEY  
10 THAT DOES INCLUDE CLINICAL SERVICES. YOU MIGHT BE SURPRISED AT  
11 THE MILLIONS OF DOLLARS THAT MIGHT BE LOST WHEN RANCHO CLOSES.  
12 THESE GRANTS FUND THE ALZHEIMER'S DISEASE RESEARCH CENTER IN  
13 CALIFORNIA, ONE OF 10 IN THE STATE WHICH PROVIDES CLINICAL  
14 SERVICES AND EDUCATION AND TRAINING THE MEDICAL PERSONNEL AND  
15 TRANSLATES RESEARCH INTO IMMEDIATE TREATMENT PROTOCOLS. THE  
16 MINORITY DIAGNOSTIC AND TREATMENT SATELLITE WHICH SUPPORTS THE  
17 DIAGNOSIS AND TREATMENT OF ETHNIC MINORITIES WITH THE FOCUS ON  
18 LATINOS AND JAPANESE AMERICANS AND THE USHEMIC VASCULAR  
19 DEMENTIA PROJECT WHICH FOCUSES ON THE TYPE OF VASCULAR DISEASE  
20 AND HOW IT CONTRIBUTES TO COGNITIVE IMPAIRMENT. THESE GRANTS,  
21 THIS OVER HALF A MILLION DOLLARS A YEAR DOES NOT INCLUDE THE  
22 GRANT MONEY FROM THE STATE USED TO FUND RANCHO ADULT DAY  
23 HEALTHCARE, WHICH ALSO INCLUDES ALZHEIMER'S ADULT DAY  
24 HEALTHCARE. RANCHO LOS AMIGOS IS CURRENTLY THE ONLY FACILITY  
25 IN EAST LOS ANGELES CAPABLE OF PROVIDING CARE FOR PEOPLE WITH



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1 DEMENTIA, CLOSING THE FACILITY MEANS THAT AN ENTIRE REGION  
2 WILL HAVE NO ACCESS. YOU CAN'T TAKE A TEST TO FIND OUT IF YOU  
3 HAVE ALZHEIMER'S DISEASE. IT REQUIRES EVALUATION AND DIAGNOSIS  
4 OF MANY TESTS AND THE SKILLED PERSONNEL AT RANCHO ARE CAPABLE  
5 OF DOING THAT. I'D LIKE TO CLOSE BY LETTING YOU KNOW THE  
6 IMPACT CLOSURE WILL HAVE AN FAMILIES WHO USE THE ADULT DAY  
7 CARE FOR THEIR LOVED ONES. THESE FAMILIES COULD NOT BE HERE  
8 TODAY DUE TO THEIR CARE GIVING DUTIES. THE COMMENTS ARE, "THE  
9 CENTER SAVED MY SANITY. IT BENEFITS ME AND MY MOTHER. MY  
10 STRESS MADE ME SICK. I'M BETTER NOW THAT SHE'S AT THE CENTER.  
11 SAVE RANCHO. IT'S OUR LIFE LINE. CLOSING RANCHO IS TOTAL  
12 DEVASTATION FOR ME. CLOSING THE CENTER WOULD MEAN MY MOTHER  
13 WOULD HAVE TO GO INTO A NURSING HOME. MY MOTHER HAS LIVED WITH  
14 ALZHEIMER'S DISEASE FOR 18 MONTHS. IT IS SO DIFFICULT FOR THE  
15 OLDER PERSON, WORSE THAN STARTING OVER. MY MOTHER NEEDS 24-  
16 HOUR, SEVEN DAY A WEEK CARE. I HOPE YOU DON'T NEED THEIR  
17 SERVICES IF YOU CLOSE THEM DOWN." THANK YOU. [ Applause ].

18

19 **SUP. BURKE, CHAIR:** ERICK BRANSON FOLLOWED BY LYNN KERSEY, AND  
20 FREDDIE SEIGLE.

21

22 **ERIC HENSEN:** I HAVE A DECLARATION ALSO FOR THE PUBLIC RECORD.  
23 MY NAME IS ERIC HENSEN. THANK YOU FOR YOUR PATIENCE IN TAKING  
24 THE TIME TO HEAR ALL OF US TODAY. I HAVE A FEW SHORT WORDS.  
25 I'M A PHYSICAL THERAPIST AT RANCHO LOS AMIGOS NATIONAL REHAB



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1 CENTER AS WELL AS CLINICAL MANAGER AT OUR SEATING CENTER.  
2 SEATING CENTER PROVIDES CARE TO ALL THE PEOPLE WE'VE SEEN  
3 TODAY IN MANAGING THEIR WHEELCHAIR-RELATED NEEDS. WE HELP THEM  
4 PREPARE THEIR CHAIRS, FIX THEIR CHAIRS, GET NEW CHAIRS, AS  
5 WELL AS MANAGING ONGOING PROBLEMS THAT THESE PEOPLE  
6 EXPERIENCE. CLOSING RANCHO WILL HAVE A DEVASTATING IMPACT ON  
7 THE PEOPLE OF LOS ANGELES COUNTY WHO RELY ON THESE SPECIALIZED  
8 PROGRAMS AND THE EXPERT CARE BECAUSE THESE SERVICES SIMPLY  
9 AREN'T AVAILABLE ELSEWHERE, AND THE SEATING CENTER IS SUCH AN  
10 EXAMPLE OF SUCH A SERVICE AVAILABLE IN THE COMMUNITY. THERE IS  
11 AN ASSUMPTION I'VE HEARD SPOKEN MANY TIMES TODAY THAT THESE  
12 SERVICES CAN BE BOUGHT OR PURCHASED, VENDORED OUT ELSEWHERE IF  
13 RANCHO CLOSES, AND I WOULD LIKE TO SAY THAT'S NOT, IN FACT,  
14 THE CASE. THE SEATING CENTER IS UNIQUE IN THE SOUTHERN  
15 CALIFORNIA AREA. IN FACT, IN ALL OF CALIFORNIA. THE SEATING  
16 CENTER RELATIVELY SPEAKING, IS A SMALL PROGRAM. IT IS PART OF  
17 A CONTINUUM THAT WILL BE LOST TO THE PEOPLE OF LOS ANGELES IF  
18 RANCHO CLOSED. THE EXPERTISE FOUND IN MANY CLINICAL AREAS,  
19 INCLUDING THE SEATING CENTER, ARE DEVELOPED BECAUSE OF A  
20 COMMITMENT TO EXCELLENCE AND OVER MANY YEARS OF EXPERIENCE  
21 WORKING WITH THE DISABLED COMMUNITY. IT IS THIS TYPE OF  
22 SETTING THAT INNOVATION WILL OCCUR. IT IS THE VAST EXPERIENCE  
23 OF THE RANCHO STHAF THAT WE WILL LOSE IF RANCH A CLOSES. THE  
24 CLOSURE OF RANCHO LOS AMIGOS AND THE SEATING WILL HAVE A  
25 DEVASTATING IMPACT ON THE PEOPLE OF LOS ANGELES. A PERSON WHO



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1 HAS SUFFERED A CATASTROPHIC INJURY IS IN NO POSITION  
2 EMOTIONALLY TO ADVOCATE FOR THEIR REHAB NEEDS AND THEREFORE  
3 ONLY A SMALL PERCENT WILL END UP IN REHABILITATION. I'M AFRAID  
4 THE REST OF THEM WILL BE WAREHOUSED IN NURSING HOME OR WILL BE  
5 SENT HOME WITHOUT THE BASIC SKILLS NEEDED TO CARE FOR  
6 THEMSELVES OR TO RETURN TO A FULFILLING LIFE. THE IMPACT ON  
7 PEOPLES HEALTH WILL BE TREMENDOUS. WE'LL SEE AN INCREASE IN  
8 BED SORES, CONTRACTURES, COMPLICATIONS, BLADDER AND RENAL  
9 PROBLEMS ALL BECAUSE OF THE COMMUNITY LACKS THE SKILLS AND  
10 EXPERIENCE TO CARE FOR THESE PEOPLE. THE EXPERTISE PROVIDED BY  
11 RANCHO AND SEATING CENTER ARE SIMPLY NOT AVAILABLE ELSEWHERE  
12 IN THE COMMUNITY. SO THE PEOPLE SERVED BY THEM WILL BE  
13 RESIGNED TO INFERIOR CARE OR NO CARE AT ALL I IMPLORE YOU TO  
14 CONSIDER ALL THE OPTIONS THAT ARE AVAILABLE TO YOU AND AVOID  
15 CLOSING RANCHO AND FIND ANOTHER SOLUTION. THANK YOU.

16

17 **SUP. BURKE, CHAIR:** THANK YOU. [ Applause ]

18

19 **GLEN KERSEY:** MY NAME IS GLEN KERSEY, I'M DIRECTOR OF MATERNAL  
20 AND CHILD HEALTH ACCESS SUCH AS A NON-PROFIT HEALTH  
21 ORGANIZATION DEDICATED TO ENSURING ACCESS TO QUALITY AND  
22 AFFORDABLE HEALTHCARE, ESPECIALLY FOR PREGNANT WOMEN AND THEIR  
23 FAMILIES. I WOULD LIKE TO RESPECTFULLY URGE THE MEMBERS OF THE  
24 BOARD OF SUPERVISORS TO PLEASE ALLOW THE PUBLIC ADEQUATE TIME  
25 AND ACCURATE INFORMATION ABOUT HOW THESE POTENTIAL REDUCTIONS



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1 AND CLOSURES WILL IMPACT THE COUNTY AND TO PROVIDE YOU WITH  
2 INFORMATION ABOUT THEIR EFFECTS AND TO ALLOW TIME FOR THE  
3 NEGOTIATIONS THAT ARE TAKING PLACE AMONG THE FEDERAL, STATE,  
4 AND COUNTY OFFICIALS TO BE COMPLETED. ALSO TO ALLOW GREATER  
5 TIME TO EXPLORE THE IMPACT STUDY THAT WAS PRESENTED FOR YOU  
6 TODAY AND TO BE ABLE TO REVIEW THE VOLUMES OF MATERIALS THAT  
7 YOU RECEIVED TODAY. I DON'T BELIEVE WE'VE ADEQUATELY TAKEN  
8 INTO ACCOUNT THE ECONOMIC CONSEQUENCES OF THE LOSS OF JOBS AND  
9 IT'S THE BIGGEST EMPLOYER IN DOWNEY, AS WAS STATED, MUCH LESS  
10 THE LIVES OF THE CITIZENRY THAT HAVE COME THROUGH RANCHO LOS  
11 AMIGOS AND WHO NOW PRODUCE AND PAY TAXES AND HOLD JOBS. VERY  
12 BRIEFLY, I WILL PRESENT SOME OF THE TESTIMONY THAT WILL BE  
13 PRESENTED IN WRITING TO YOU BY FRIDAY FROM THE CALIFORNIA  
14 CHILDREN'S SERVICES WORK GROUP ABOUT THE IMPACT ON CHILDREN'S  
15 BEDS BECAUSE I DON'T THINK WE'VE HEARD MUCH ABOUT THAT TODAY.  
16 C.C.S., CALIFORNIA CHILDREN'S SERVICES APPROVES INPATIENT  
17 REHAB CENTERS AND UNITS TO PROVIDE REHAB SERVICES TO CLIENTS.  
18 IN L.A. COUNTY, THE ONLY C.C.S. APPROVED INPATIENT REHAB UNITS  
19 ARE RANCHO LOS AMIGOS NATIONAL REHAB CENTER, CHILDREN'S  
20 HOSPITAL LOS ANGELES, NORTH RIDGE MEDICAL CENTER FOR CHILDREN  
21 OVER 14, GLENDALE ADVENTIST MEDICAL CENTER FOR CHILDREN OVER  
22 14 AND CASA COLINA. SO THERE ARE MANY RESTRICTIONS ON THESE  
23 POTENTIAL SITES FOR TRANSFER. DURING THE WEEK OF JANUARY 20,  
24 HEALTH POLICY TRAINEES CALLED THE MEDICAL DIRECTORS OR NURSE  
25 MANAGERS OF THESE FACILITIES ABOUT THEIR CAPACITY AND LEARNED



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1 THE FOLLOWING. WE WOULD HAVE TO MOVE 15 TO 20 PATIENTS IN THE  
2 PEDIATRIC UNIT AND 10 TO 15 ADOLESCENTS ELSEWHERE IN RANCHO  
3 LOS AMIGOS FOR A TOTAL OF 25 TO 35 CHILDREN AND YOUTH UNDER  
4 THE AGE OF 21. THIS NUMBER IS INCONSISTENT WITH THE 13  
5 PEDIATRIC REHAB BEDS IDENTIFIED IN THE BEILENSON NOTICE. FOR  
6 YOUR INFORMATION, THERE ARE MANY, MANY DEFICIENCIES IN THAT  
7 NOTICE, BUT THAT WAS ONE OF THEM. CHILDREN'S HOSPITAL HAS A  
8 30-BED CAPACITY WITH 12 PATIENTS ON AVERAGE AND CAN TAKE  
9 CHILDREN AND ADOLESCENTS BUT SPINAL CORD INJURIES, VENTILATOR  
10 DEPENDENT PATIENTS OR THOSE INJURED THROUGH GANG VIOLENCE MAY  
11 NOT BE ADMITTED. NORTHRIDGE DOESN'T TAKE CHILDREN UNDER 14,  
12 NOR DOES CASA COLINA. IF RANCHO LOS AMIGOS MUST RELOCATE 25 TO  
13 30 CHILDREN UNDER 21, THERE'S NOT ENOUGH C.C.S PANELED BED  
14 CAPACITY IN THE COUNTY. WILL YOU NOT HAVE THE COURAGE TO SAVE  
15 RANCHO LOS AMIGOS FOR OUR CHILDREN IF YOU DON'T HAVE THE  
16 COURAGE TO SAVE IT FOR THE REST OF THE PATIENTS WHO ARE THERE?  
17 THANK YOU VERY MUCH. [ Applause ].

18  
19 **SUP. BURKE, CHAIR:** THANK YOU. FREDDIE SEIGLE AND THEN GREG  
20 WASKAL, I THINK IT IS. THEN FERN HAYES.

21  
22 **GREG WASKUL:** GOOD AFTERNOON. I'M GREG WASKUL I'M THE PRESIDENT  
23 OF THE RANCHO LOS AMIGOS FOUNDATION. AND I'M HERE TO HEARTILY  
24 ENDORSE THE NOT-FOR-PROFIT OPTION FOR RANCHO WHICH I THINK  
25 BOTH RANCHO LEADERSHIP IN THE PHILANTHROPIC COMMUNITY BELIEVE





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1 IS THE RIGHT SOLUTION FOR RANCHO AND ITS PATIENTS, BOTH FOR  
2 TODAY AND TOMORROW. CALIFORNIA COMMUNITY FOUNDATION STUDY DONE  
3 BY THE MOST RESPECTED AND EXPERIENCED REHABILITATION MEDICINE  
4 EXPERTS IN THE NATION CLEARLY SHOWS THAT RANCHO CAN BE HIGHLY  
5 EFFECTIVE AS A NOT-FOR-PROFIT ENTITY. THE NEED FOR RANCHO HAS  
6 NEVER BEEN GREATER. YOU'VE HEARD IT ALL DAY LONG. TODAY, L.A.  
7 COUNTY IS MORE THAN 150 REHAB BEDS SHORT, AND WITHOUT RANCHO  
8 IN THE HEALTHCARE SYSTEM, COUNTY AND PRIVATE HOSPITAL  
9 EMERGENCY ROOMS WILL BACK UP. THE QUALITY OF SERVICES TO  
10 INDIVIDUALS WITH DISABLING ILLNESSES AND INJURIES WILL  
11 DECREASE AND AS LYNN JUST TOLD YOU, MANY VENTILATOR-DEPENDENT  
12 CHILDREN AND ADULT PATIENTS WILL HAVE NO HOPE OF RECEIVING  
13 QUALITY REHABILITATION CARE IN L.A. COUNTY, AND I CAN TELL YOU  
14 FROM MY OWN PERSONAL EXPERIENCE THAT, AND I'M SURE DON CAN  
15 TELL YOU, THERE ARE MANY, MANY, MANY CHILDREN AT RANCHO RIGHT  
16 NOW, THAT IF THERE WERE NO RANCHO, THOSE CHILDREN WOULD BE  
17 DEAD. IF YOU KILL RANCHO, YOU CAN NEVER RECREATE THE TALENTED  
18 TEAM THAT ENCOURAGES THE MIRACULOUS RECOVERIES WE'VE SCENE  
19 EACH DAY. YOU CANNOT ALSO RECREATE THE RANCHO BRAND, WHICH IS  
20 ONE OF THE STRONGEST HEALTHCARE DELIVERY BRANDS IN AMERICA,  
21 AND THOSE TWO THINGS TOGETHER ARE WHAT MAKE RANCHO A CANDIDATE  
22 TO BE VERY EFFECTIVE AS A NOT-FOR-PROFIT. YOU CAN WAREHOUSE  
23 DISABLED PATIENTS AT OTHER PLACES. IF YOU LOOK AT THE BLUE  
24 REPORT, THERE'S PLENTY OF CAPACITY IN LOS ANGELES COUNTY.  
25 UNFORTUNATELY, THE BLUE CONSULTING REPORT LOOKS AT LICENSED





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1 BEDS, NOT STAFF BEDS, SO UNDER THEIR METHODOLOGY, RANCHO WOULD  
2 HAVE 395 BEDS, NOT THE 207. THERE ARE NOWHERE NEAR ENOUGH  
3 BEDS. AND SOMETHING THAT I THINK THE BOARD REALLY NEEDS TO  
4 KNOW IS YOU SEE THE CENSUS NUMBERS, BUT DESPITE THE ACTION ON  
5 OCTOBER 29TH, NOT ONE KEY RANCHO STAFF MEMBER, NOT ONE, HAS  
6 QUIT OR RESIGNED. THE RANCHO STAFF IS DETERMINED TO STAND AND  
7 FIGHT FOR WHAT THEY BELIEVE IN AND TO FIGHT FOR WHAT IS RIGHT.  
8 WHAT WE'VE BEEN TALKING ABOUT IS WHAT IS THE MOST COST  
9 EFFECTIVE, BUT I THINK A QUESTION THAT NEEDS TO BE ASKED IS,  
10 WHAT IS RIGHT. FOR 115 YEARS, THE CITIZENS OF THIS COUNTY HAVE  
11 BEEN INVESTING IN RANCHO HELPING INDIVIDUALS REALIZE THE POWER  
12 OF THEIR DREAMS, AND YOU CAN EITHER LEVERAGE THAT INVESTMENT  
13 INTO THE FUTURE OR YOU CAN THROW IT ALL AWAY, BUT AS YOU'VE  
14 HEARD TODAY, THERE IS NO SUBSTITUTE FOR RANCHO. IT'S TIME TO  
15 SET RANCHO FREE TO SEEK ITS OWN DESTINY AS A NOT-FOR-PROFIT  
16 FOUNDATION SO IT MAY BUILD ITS OWN BRIDGE TO INDEPENDENCE. IT  
17 WILL BE CHALLENGING, OF COURSE, BUT NOT NEARLY AS CHALLENGING  
18 AS THE TASKS FACED BY OUR PATIENTS, AND YOU'VE SEEN WHAT  
19 THEY'VE OVERCOME. IF A SOLID OPTION APPEARED, THE BOARD HAS  
20 STATED, IT WOULD PREFER TO KEEP RANCHO OVER THAN TO LOSE THIS  
21 VITAL RESOURCE, AND THE PHILANTHROPIC COMMUNITY WITH THE  
22 LEADERSHIP OF THE CALIFORNIA COMMUNITY FOUNDATION HAS GIVEN  
23 YOU THAT OPTION TODAY. IT IS THE ONLY SOLUTION THAT IS A WIN  
24 FOR THE COUNTY AND A WIN FOR OUR PATIENTS. SO TO THE BOARD,  
25 PLEASE DO THE RIGHT THING AND SET RANCHO FREE. THANK YOU.



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1

2 **SUP. BURKE, CHAIR:** FERN HAYES. FERN HAYS. ROSE MAY. IS ROSE  
3 MAY HERE? ANDREA BULLOCK. AND ANDREA -- ANDREA BULLOCK? GLENA  
4 ACKEL. FOLLOWED BY EVE HILL. AND FOLLOWED BY WINNIE ULE. EVE  
5 HILL AND WINNIE ULE.

6

7 **GLENA ACKEL:** I'M GLENA ACKEL FROM THE LEGAL AID FOUNDATION OF  
8 LOS ANGELES. I JUST WANTED TO SAY ABOUT THE DECLARATION, IF WE  
9 COULD HAVE GOTTEN HERE SOONER, WE WOULD HAVE, BECAUSE WE  
10 REALIZED THAT YOU ARE ALL NOT SPEED READERS. I HELPED PREPARE  
11 THE ONE DEALING WITH THE REDUCTION OF BEDS AT L.A. COUNTY, SO  
12 I'LL ADDRESS MY REMARKS TO THAT PARTICULAR ISSUE. I HAVE BEEN  
13 COMING TO THESE HEARINGS SINCE 1983, SO I'M VERY LONG IN THE  
14 TOOTH AND I DIDN'T THINK ANYTHING COULD SURPRISE ME, BUT IN  
15 TALKING WITH THE DOCTORS AT COUNTY U.S.C. ASK SEEING WHAT'S  
16 GOING ON THERE, IT EXCEEDED MY WILDEST NIGHTMARES ABOUT WHAT  
17 IS ACTUALLY HAPPENING IN THERE, AND I REALLY URGE YOU TO READ  
18 THE DECLARATIONS SUBMITTED BY THE COUNTY U.S.C. DOCTORS,  
19 PARTICULARLY THE EMERGENCY ROOM DOCTORS AND THE SURGERY, WHERE  
20 I COULD -- FOR EXAMPLE, ONE DOCTOR HERE TODAY READ HIS  
21 DECLARATION, MR. NEWTON, GARY PIENDA, AND ALSO ONE OF THE  
22 SURGERY RESIDENTS, DR. SAVAGE, TO SEE ACTUALLY WHAT'S GOING ON  
23 THERE. I CAN'T DEVINE THE BOARD'S REASONING FOR MAKING ALL THE  
24 BED REDUCTIONS. I'M NOT TALKING ABOUT THE CLOSURE OF RANCHO AT  
25 COUNTY U.S.C. BECAUSE IT SEEMS LIKE THEY ARE ALREADY WORKING



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1 OVER CAPACITY. THE EMERGENCY ROOM IS FULL. OFTENTIMES, AS  
2 YOU'LL SEE IN THE DECLARATION, THAT THE BEDS ARE ALREADY FULL  
3 AND PEOPLE KEEP COMING IN. FOR EXAMPLE, THERE'S 28 BEDS AND  
4 OFTEN THERE IS 40 PEOPLE IN THE EMERGENCY ROOM. BOTH THE  
5 DOCTORS INDICATE THAT PREVENTABLE DEATHS HAPPEN BECAUSE OF  
6 THAT. ALL OF US, WHEN WE'RE IN AN AMBULANCE, GO TO AN  
7 EMERGENCY ROOM. WE DON'T HAVE ANY CHOICE ON THAT, AND SO ALL  
8 THE COUNTY TAXPAYERS WILL BE AFFECTED BY THE FACT THAT WITH  
9 THESE BED REDUCTIONS AND EVEN NOW, U.S.C. CAN'T RESPOND TO THE  
10 EMERGENT NEED THAT IS PREVENTED BY THE RESIDENTS OF THE COUNTY  
11 AND BY REDUCING, MAKING THE 50-BED REDUCTION THIS YEAR AND ONE  
12 THE FOLLOWING YEAR, THAT PROBLEM IS GOING TO BE EXACERBATED  
13 AND INCREASED, AND I REALLY DO URGE YOU TO READ THE  
14 DECLARATION AND I'M NOT GOING TO GO OVER WHAT OTHER PEOPLE  
15 HAVE SAID, BUT ONE THING THAT HASN'T BEEN ADDRESSED THAT ALL  
16 THE RESIDENTS TOLD ME OVER AND OVER AGAIN, THAT THERE ISN'T A  
17 SUFFICIENT OPERATING CAPACITY AT COUNTY U.S.C., SO THERE'S  
18 THEORETICALLY A TRIAGE, BUT AS SOMEONE COMES IN, IT DOESN'T  
19 MEAN THAT THEY CAN BE OPERATED ON RIGHT AWAY BECAUSE THERE'S  
20 CONSTANT BACKUP IN THE OPERATING ROOM BECAUSE THERE ISN'T  
21 SUFFICIENT STAFF. MAINLY, OPERATING ROOM NURSES, BUT ALSO  
22 RESIDENTS. SO CONSEQUENTLY, THAT HAS AN IMPACT ON ALL THE  
23 PEOPLE --  
24



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1   **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH. YOUR TIME HAS EXPIRED.  
2   THANK YOU. DIANNE BOGS. MELISSA DAMON. MELISSA ZAMMOT. I'M NOT  
3   SURE I'M PRONOUNCING YOUR NAME CORRECTLY. GENEVIEVE CLAVREUL.  
4   GENEVIEVE IS GONE? SHE'S COMING. DAVID HAYES. DAVID HAYES? JOE  
5   BEAR -- HEALING BEAR. THANK YOU. WILL YOU STATE YOUR NAME IN.

6

7   **WINNIE YULE:** MY NAME IS WINNIE YULE, PHARMACIST AT RANCHO FOR  
8   17 YEARS. RECENTLY, RANCHO HAS GIVEN MY FAMILY A GIFT. I WILL  
9   SHARE WITH YOU ABOUT THIS GIFT. MY 77-YEAR-OLD MOTHER HAD BEEN  
10   TREATED IN THE COMMUNITY FOR WHAT WAS DIAGNOSED AS PARKINSON'S  
11   DISEASE. HER NEUROLOGIST PRESCRIBED CONVENTIONAL MEDICATIONS  
12   WHICH HAD BEEN SHOWN TO LESSEN SYMPTOMS. HOWEVER, SHE  
13   CONTINUED TO DETERIORATE. DESPERATE FOR ANSWERS, I TURNED TO  
14   THE NEURO SCIENCE DEPARTMENT AT RANCHO FOR ASSISTANCE. MY  
15   MOTHER WAS ADMITTED TO THE JACKLINE PERRIE INSTITUTE FOR A  
16   THOROUGH WORK-UP. DURING HER STAY AT RANCHO, OUR PHYSICIAN  
17   SPECIALISTS DETERMINED THAT SHE WAS MOST LIKELY SUFFERING FROM  
18   LOUIE BODY DEMENTIA. HER PARKINSON'S MEDICATIONS WERE  
19   DISCONTINUED AND SHE SHOWED DRAMATIC, SYMPTOMATIC IMPROVEMENT.  
20   FROM MY FIRSTHAND EXPERIENCE, I CAN UNEQUIVOCALLY CHAMPION THE  
21   OUTSTANDING WORK PERFORMED BY THE NEURO SCIENCE DEPARTMENT AT  
22   RANCHO. WITH THE IMPENDING CONSIDERATION OF CLOSURE OF THIS  
23   CROWN JEWEL OF THE COUNTY, A TRUE MODEL FOR OTHER COUNTIES IN  
24   THE UNITED STATES, I FEEL OBLIGATED TO IMPLORE THE BOARD TO  
25   RECONSIDER ITS INTERIM DECISION AND EXPLORE EVERY POSSIBLE



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1 MEANS TO ALLOW RANCHO TO CONTINUE TO SERVE THE POPULACE OF LOS  
2 ANGELES COUNTY WITH FIRST RATE REHAB SERVICES. THANK YOU VERY  
3 MUCH FOR THE OPPORTUNITY.

4

5 **SUP. BURKE, CHAIR:** THANK YOU. GENEVIEVE?

6

7 **GENEVIEVE CLAVREUL:** GOOD AFTERNOON. GENEVIEVE CLAVREUL. FIRST  
8 OF ALL, I WANT TO COMPLIMENT SUPERVISOR KNABE AND FOR THE  
9 COURAGE HE SHOWED IN TRYING TO KEEP RANCHO OPEN. [ Applause ]

10

11 **GENEVIEVE CLAVREUL:** TO EVEN HAVE CONTEMPLATED THE CLOSURE OF  
12 RANCHO LOS AMIGOS IS CRIMINAL. THE SAME WAY TO CUT 100 BED OUT  
13 OF U.S.C. TO MAKE THAT KIND OF A DECISION, YOU NEED TO HAVE  
14 THE FACTS, AND DEFINITELY THE COUNTY DOES NOT HAVE THE FACTS.  
15 YOU KNOW, WE WENT TO MEETING, I WENT TO EVERY ONE OF THEM. WE  
16 WERE GIVEN GARBAGE IN, SO YOU GOT GARBAGE OUT. WE NEVER HAD  
17 THE APPROPRIATE FIGURE. DR. CARTWRIGHT COULD NOT EVEN  
18 ENUNCIATE THE RESPONSE WHEN WE ASKED HIM QUESTIONS. WHERE HAVE  
19 THEY BEEN TODAY, WHEN HE SHOULD HAVE FACED THE PEOPLE IS GOING  
20 TO FORCE TO NOT HAVE CARE. HE DIDN'T EVEN HAVE THE COURAGE TO  
21 SIT DOWN THE WHOLE TIME AND LISTEN, AND I THINK HE SHOULD HAVE  
22 BEEN THERE. [ Applause ]

23

24 **GENEVIEVE CLAVREUL:** AS RESPECT FOR THE PEOPLE. I SEE YOU HAVE  
25 NOT DONE YOUR WORK ABOUT THE CLOSURE OF RANCHO LOS AMIGOS.



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1 EARLY ON, MANY OF US BROUGHT THE SUGGESTION OF HAVING A  
2 NONPROFIT. THERE'S A LOT OF MONEY IN THIS COUNTY. IT COULD  
3 HAVE BEEN DONE. NOBODY WANTED THAT SOLUTION. ALL OF A SUDDEN,  
4 AT THE LAST HOUR, WE ARE SAYING IT'S WHAT WE NEED TO SAVE  
5 RANCHO LOS AMIGOS. [INAUDIBLE] THE VALUE OF RANCHO HAS REALLY  
6 CHANGED. MANY MONTHS AGO, RANCHO WAS A JEWEL, A PERFECT JEWEL  
7 WITH A TREMENDOUS VALUE. NOW IT'S A FIRE SALE. SOMEBODY COME  
8 UP AND PICK UP FOR PEANUTS. YOU KNOW, I THINK SOMETHING IS  
9 GOING ON THAT WE DO NOT KNOW HERE. I COME HERE AS AN EXPERT IN  
10 HEALTH. EVEN AN R.N. FOR 40 YEARS. I AM A Ph.D. IN HEALTH  
11 MANAGEMENT. I KNOW WHAT'S GOING ON. I THINK THERE SHOULD HAVE  
12 BEEN MEETINGS ONGOING OF ALL OF YOUR SUPERVISORS WITH THE  
13 COMMUNITY, YOU SHOULD HAVE BEEN GIVEN INFORMATION TO MAKE  
14 DECISION, YOU SHOULD HAVE LISTENED. YOU HAVE NOT. SUPERVISOR  
15 MOLINA WENT TO CUBA.. I WOULD LIKE TO KNOW HOW MUCH MONEY SHE  
16 SPENT WHILE IN CUBA. [ Applause ]

17

18 **GENEVIEVE CLAVREUL:** I WOULD LIKE SOME FINANCIAL DISCLOSURE FOR  
19 THAT MEETING. I THINK PEOPLE HAVE BEEN LESS THAN FORWARD WITH  
20 US, AND I THINK IT SHOULD NEVER EVEN BE CONTEMPLATED TO CLOSE  
21 RANCHO LOS AMIGOS OR 100 BED AT COUNTY U.S.C. I THINK WE  
22 SHOULD BE THERE TO FIGHT AND THERE TO WIN. [ Enthusiastic  
23 Cheers and Applause ].

24



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1   **SUP. BURKE, CHAIR:** SANDRA ROBINSON, YOLANDA RIVERA. MAYBE I  
2   BETTER SAY IT AGAIN. SONDR A ROBINSON, YOLANDA RIVERA. CURT  
3   BALDWIN. DAVID BERRY. AMMIEL STOHL. IF I'VE CALLED YOUR NAME,  
4   PLEASE COME FORWARD. MARCO PEARL. LYDIA SMITH. STATE YOUR  
5   NAME.

6

7   **MELISSA SZAMET:** I'M MELISSA SZAMET, I'M PRESIDENT OF THE  
8   OCCUPATIONAL THERAPY ASSOCIATION OF CALIFORNIA AND THANK YOU  
9   FOR PROVIDING THIS FORUM TODAY. LIKE SO MANY HERE TODAY HAVE  
10   EXPRESSED SO ELOQUENTLY AND SUCCINCTLY THE EFFECTS OF THE  
11   POTENTIAL CLOSURE OF RANCHO ON ITS PATIENTS, THE COUNTY  
12   MEDICAL SYSTEM AND THE COMMUNITY AT LARGE. WE AS AN  
13   ASSOCIATION CAN ONLY CONCUR WITH THESE REASONS AND STRONGLY  
14   URGE YOU TO FIND A CREATIVE SOLUTION TO CONTINUE TO PROVIDE  
15   THESE REHAB SERVICES. RANCHO IS A SHINING STAR FOR THE COUNTY  
16   OF LOS ANGELES. IT IS A HOSPITAL THAT IS A BENCHMARK FOR  
17   OTHERS. IT SHOULD BE BRAGGED ABOUT AND MARKETED, NOT CLOSED.  
18   RANCHO AS GENEROUSLY SHARED ITS KNOWLEDGE WITH THE LARGER  
19   REHAB COMMUNITY. IT HAS AN INDIRECT IMPACT ON THE COUNTLESS  
20   PATIENTS WHO HAVE NEVER EVEN BEEN THERE. I HAVE BEEN A  
21   PRACTITIONER IN SOUTHERN CALIFORNIA FOR 35 YEARS AND HAVE  
22   FREQUENTLY CALLED UPON THEIR EXPERTISE. AS A TRAINING CENTER,  
23   RANCHO HAS EDUCATED COUNTLESS OCCUPATIONAL THERAPY STUDENTS,  
24   PHYSICAL THERAPY STUDENTS, SPEECH THERAPY, NURSING STUDENTS,  
25   AND MEDICAL STUDENTS. THE COUNTY, STATE, AND INDEED COUNTRY





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1 HAVE BENEFITED FROM THE STUDENTS THAT HAVE GONE FORTH AND  
2 TAKEN JOBS. PLEASE KEEP THIS WONDERFUL REHAB CENTER OPEN.  
3 THANK YOU.

4

5 **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH. [ Applause ].

6

7 **SUP. BURKE, CHAIR:** WOULD YOU STATE YOUR NAME?

8

9 **KURT BALDWIN:** GOOD AFTERNOON. MY NAME IS KURT BALDWIN. I  
10 REPRESENT THE INDEPENDENT LIVING CENTER OF SOUTHERN  
11 CALIFORNIA. OUR CATCHMENT AREA INCLUDES THE SAN FERNANDO, SAN  
12 CLARITA AND ANTELOPE VALLEYS. WE SERVE OVER 6,000 PEOPLE WITH  
13 SIGNIFICANT DISABILITIES ANNUALLY. OUR MISSION IS TO ASSIST  
14 CLIENTS WITH GAINING THE SKILLS AND KNOWLEDGE NECESSARY TO  
15 LIVE AS INDEPENDENTLY AS POSSIBLE. OFTEN, CLIENTS RETURN TO BE  
16 SELF-SUFFICIENT AND CONTRIBUTING AFTER DISABLING ACCIDENT OR  
17 ILLNESSES. AS YOU HEARD TODAY, IT IS NOT JUST POOR PEOPLE THAT  
18 BENEFIT FROM RANCHO LOS AMIGOS NATIONAL REHABILITATION CENTER.  
19 OFTEN, PEOPLE THAT HAVE SPINAL CORD INJURY, TRAUMATIC BRAIN  
20 INJURY OR OTHER DISABLING TRAUMA RUN THROUGH THEIR CAP ON  
21 MEDICAL INSURANCE AFTER ONLY A FEW MONTHS IN PRIVATE  
22 HOSPITALS. WHERE WILL PEOPLE CURRENTLY SERVED BY RANCHO GO?  
23 MORE THAN LIKELY, THEY WILL NEVER RECEIVE THE LEVEL OF  
24 REHABILITATION NECESSARY IN ORDER TO ACHIEVE THE LEVEL OF  
25 FUNCTIONING THAT WILL FOSTER INDEPENDENCE. AND SO, MAY BE



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1 INSTITUTIONALIZED FOR THEIR REMAINING LIVES. IT IS WELL KNOWN  
2 THAT PEOPLE WITH DISABILITIES IN INSTITUTIONS DO NOT LIVE AS  
3 LONG OR WITH THE QUALITY OF LIFE AS PEOPLE THAT LIVE  
4 INDEPENDENTLY IN THE COMMUNITY. WE ARE AT A TIME IN OUR  
5 SOCIETY WHERE WE HAVE DECIDEDLY CHOSEN NOT TO CONDEMN PEOPLE  
6 WITH DISABILITIES TO LIVES OF DEPENDENCY, YET YOU, AS ELECTED  
7 COUNTY REPRESENTATIVES, HAVE DECIDED THAT THE LIVES -- THAT  
8 LIVES OF DEPENDENCY AND THE ASSOCIATED COSTS, BECAUSE THOSE  
9 COSTS WILL NOT BE BORNE BY THE COUNTY, THEY WILL BE BORNE BY  
10 ALL OF US ARE OKAY, IN ORDER TO BALANCE THE BUDGET. IT IS NOT  
11 ACCEPTABLE TO SHIFT COST -- IT IS NOT ACCEPTABLE. IF YOU SHIFT  
12 COSTS NEW NEUTRALLY, THAT'S ONE THING, BUT TO SHIFT COST SO  
13 THAT WE ALL PAY MORE ECONOMICALLY AND SOCIALLY IS  
14 IRRESPONSIBLE. THANK YOU.

15

16 **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH. [ Applause ]

17

18 **SUP. BURKE, CHAIR:** YOUR NAME, SIR.

19

20 **EMILE STOTLE:** LADIES AND GENTLEMEN, TWO YEARS AGO, I  
21 CONTRACTED A DISEASE CALLED --

22

23 **SUP. BURKE, CHAIR:** COULD YOU GIVE YOUR NAME?

24

25 **EMILE STOTLE:** EMILE STOTLE THE THIRD.



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1

2 **SUP. BURKE, CHAIR:** MAYBE ISSUED CALL SOME OF THE PEOPLE WHO  
3 MAY HAVE NOT HAVE HEARD -- IS IT MARCO? ALL RIGHT. LIDIA  
4 SMITH, DAVID BARRIE, SANDRA ROBINSON, YOLANDA VERA. THE NEXT  
5 PERSON WILL BE MANDY JOHNSON. ALL RIGHT. THANK YOU. I'M SORRY  
6 TO INTERRUPT YOU.

7

8 **EMILE STOTLE:** THAT'S FINE. TWO YEARS AGO, ON DECEMBER 6 OF THE  
9 YEAR 2000, I CONTRACTED A DISEASE CALLED GEEON BERET SYNDROME,  
10 AS KNOWN AS G.B.S. WITHIN 48 HOURS OF SYMPTOMS, I HAD BECOME A  
11 TOTAL QUADRIPLLEGIC. HAD NO FEELING OTHER THAN THE FEELING OF  
12 TINGLING, PINS AND NEEDLES IN MY EXTREMITIES AND ABSOLUTELY NO  
13 MOTOR FUNCTIONS WHATSOEVER. ANYBODY THAT'S FAMILIAR WITH THE  
14 DISEASE, NOT VERY MANY INSTITUTIONS IN THIS COUNTRY CAN  
15 DIAGNOSE THIS DISEASE, LET ALONE THEN TREAT IT. I WAS IN THE  
16 INTENSIVE CARE HOSPITAL THERE AT OLIVE VIEW THERE FOR ABOUT 14  
17 DAYS. THEN FROM THERE, SHIPPED OFF DOWN TO RANCHO LOS AMIGOS.  
18 AT THAT TIME, I ONLY HAD BARELY A 5% CHANCE OF LIVING, LET  
19 ALONE POSSIBLE RECOVERY FROM THIS DISEASE TO THE POINT WHERE  
20 EVENTUALLY NOW IT'S HOPEFUL I MIGHT BE ABLE TO GET OUT OF THIS  
21 WHEELCHAIR. BUT WITHOUT RANCHO, THIS WOULD NOT BE POSSIBLE AND  
22 IT WOULDN'T BE POSSIBLE FOR ME TO BE HERE AT THIS TIME TO  
23 SPEAK IN FRONT OF YOU BECAUSE I WOULDN'T BE HERE IF THE  
24 DISEASE WASN'T DIAGNOSED PROPERLY AND TREATED PROPERLY. TO  
25 GIVE YOU AN EXAMPLE OF THAT, LIKE I SAID, I'VE BEEN IN THIS



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1 WHEELCHAIR FOR OVER TWO YEARS, AND IT WASN'T PROGNOSIS --  
2 PROGNOSIS WAS 50/50 WHETHER I'D BE ABLE TO EVEN STAND, LET  
3 ALONE MOVE MY ARMS, DO ANY KIND OF FUNCTIONS, EVER PICK UP A  
4 COIN OR HOLD A PEN -- COIN OR HOLD A PEN, BUT I WANT TO GIVE  
5 YOU AN EXAMPLE OF WHAT I HAVE DONE THROUGH RANCHO. [ Applause  
6 ] [ Cheers and Applause ]

7

8 **SUP. BURKE, CHAIR:** THAT'S WONDERFUL.

9

10 **EMILE STOTLE:** I BELIEVE THAT SHOULD SPEAK FOR ITSELF. THANK  
11 YOU VERY MUCH.

12

13 **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH. [ Cheers and Applause  
14 ]

15

16 **SUP. BURKE, CHAIR:** MANDY JOHNSON, THERESA FOBUSI, MICHAEL  
17 PFEFFER. IS THAT MANDY JOHNSON COMING DOWN? AND TERESA FAVUZZI  
18 AND MICHAEL PFEIFFER. STATE YOUR NAME, PLEASE.

19

20 **TERESA FAVUZZI:** HI. MY NAME IS TERESA FAVUZZI. I WORK WITH THE  
21 CALIFORNIA FOUNDATION FOR INDEPENDENT LIVING CENTERS, 29  
22 CENTERS ACROSS THE STATE OF CALIFORNIA, MANY OF WHICH HAVE  
23 STAFF AND CONSUMERS WHO HAVE USED RANCHO SERVICES. ON BEHALF  
24 OF ALL OF THE NORTHERN CALIFORNIA INDEPENDENT LIVING CENTERS  
25 WHO CANNOT BE HERE TODAY, I WILL SAY ALL OF THE SOUTHERN



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1 CALIFORNIA CENTERS ARE VERY WELL REPRESENTED HERE. I ASK THAT  
2 YOU FIND A SOLUTION TO KEEP RANCHO LOS AMIGOS OPEN. CHOICE.  
3 CHOICE IS THE FOUNDATION OF THE INDEPENDENT LIVING MOVEMENT, A  
4 CHOICE TO LIVE WHERE WE WANT TO LIVE, GO WHERE WE WANT TO GO,  
5 GET OUR MEDICAL CARE WHERE IT'S BEST FOR US, AND TO WORK AND  
6 BE PRODUCTIVE. THE NUMBER ONE CHOICE FOR MEDICAL CARE IN LOS  
7 ANGELES COUNTY IS RANCHO LOS AMIGOS, AND NOW IT'S YOUR CHOICE  
8 TO KEEP RANCHO OPEN. THANK YOU. [ Applause ].

9

10 **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH. DINA GARCIA, KAREN  
11 HENDERSON-WINGE, DINA GARCIA, KAREN HENDERSON-WINGE, LYDIA  
12 CHAVEZ. PLEASE STATE YOUR NAME.

13

14 **MICHAEL PFEIFFER:** GOOD AFTERNOON, SUPERVISORS. I'M MIKE  
15 PFEIFFER, EXECUTIVE DIRECTOR OF THE LOS ANGELES COUNTY  
16 EMERGENCY MEDICAL DIRECTOR'S ASSOCIATION. WE'RE A NONPROFIT  
17 ASSOCIATION OF EMERGENCY PHYSICIANS. MEDICAL BILLING AND  
18 CONSULTING COMPANIES THAT REPRESENT ABOUT 40% OF THE EMERGENCY  
19 MEDICAL SERVICES PROVIDED IN THE COUNTY. THROUGHOUT TODAY, YOU  
20 HAVE PREVIOUSLY RECEIVED TESTIMONY ON HOW THESE CLOSURES WILL  
21 IMPACT EMERGENCY MEDICAL SYSTEMS AND SO ON, SO I'LL ABBREVIATE  
22 MY REMARKS ACCORDINGLY. IN THE WAKE OF PREVIOUS HEALTHCARE  
23 CUTS, WE ARE NOW CURRENTLY SURVEYING OUR MEMBERS AND ARE  
24 RECEIVING REPORTS OF PATIENTS AT OR EMERGENCY DEPARTMENTS THAT  
25 HAVE RUN OUT OF MEDICATIONS AND ARE UNAWARE OF HOW TO HAVE



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1    THEM FILLED OR THEY'RE SEEKING FOLLOW-UP CARE NOW THAT THEIR  
2    COUNTY CLINIC HAS CLOSED. OUR MEMBERS ARE REPORTING  
3    SIGNIFICANT INCREASES IN WAITING TIMES FOR EMERGENCY PATIENTS.  
4    WITH OVERLOAD SITUATIONS ENOUGH TO CAUSE DIVERSION OF  
5    AMBULANCES. PHYSICIANS AND NURSES ARE WORKING DILIGENTLY TO  
6    KEEP UP WITH A GROWING DEMAND, BUT THESE PRESSURES ARE TAKING  
7    THEIR TOLL. WHEN ASKED ABOUT EMERGENCY DEPARTMENT CAPACITY AND  
8    THEIR ABILITY TO TAKE MORE PATIENTS SHOULD ADDITIONAL COUNTY  
9    FACILITIES CLOSE OR BE SEVERELY REDUCED, OUR MEMBERS RESPONDED  
10    MANY ARE ALREADY AT CAPACITY AND LITTLE ROOM FOR MORE PATIENTS  
11    THAN ARE SEEN NOW. THEREFORE, IN SUMMARY, OUR MESSAGE TO YOU  
12    TODAY IS THAT THE EMERGENCY MEDICAL SYSTEM IN LOS ANGELES  
13    COUNTY IS DANGEROUSLY OVERLOADED. WE RESPECTFULLY REQUEST THAT  
14    REJECT PROPOSALS SUCH AS THE CLOSURE OF KEY HEALTHCARE  
15    FACILITIES SUCH AS RANCHO AND THE COUNTY U.S.C. BEDS. SUCH  
16    FURTHER CUTS IN THE HEALTHCARE SYSTEM WILL ULTIMATELY RESULT  
17    IN INCREASING DEMANDS UPON THE EMERGENCY MEDICAL SYSTEM.  
18    PLEASE CONTINUE TO PURSUE ONGOING AND NEW STRATEGIES THAT CAN  
19    PRESERVE THE EFFECTIVENESS OF HEALTHCARE SAFETY NET AND  
20    EMERGENCY MEDICAL HEALTHCARE COMPONENT. THANK YOU.

21

22    **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH. JOHN URIBY, URIBY &  
23    ASSOCIATES, CANDILANA HERNANDEZ. IS CANDILANA STILL HERE?  
24    ROXANA MORALES. CORRINE TINCOC? AND A NURSE, JEAN RICE KURIL,  
25    660. STATE YOUR NAME.



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1

2 **GARCIA:** [ Unintelligible ] THE REASON WHY I CAME UP HERE NOW  
3 IS BECAUSE I DID NOT WANT TO BE CLASSIFIED AS "THE WHEELCHAIR  
4 PERSON." I WANTED TO BE CLASSIFIED AS [Unintelligible ]  
5 GARCIA, A PERSON. I'M HERE TO SPEAK ON BEHALF OF THE PEOPLE IN  
6 THE RANCHO CENTER. I WANTED TO OPPOSE THE CLOSING OF RANCHO  
7 LOS AMIGOS. I ALSO WANTED TO LET YOU GUYS KNOW THAT I WAS VERY  
8 DISAPPOINTED BY THE LACK OF TIME TO GIVE TESTIMONY. [  
9 Unintelligible ] PLEASE LISTEN TO WHAT WE HAVE TO SAY. WE ARE  
10 PEOPLE WITH DISABILITIES, NOT WHEELCHAIR PEOPLE. THERE ARE A  
11 LOT OF PEOPLE WITH DISABILITIES. DON'T THINK THAT SOCIETY  
12 WILL... PEOPLE ARE GOING OUT INTO THE FIELD TO MAKE MONEY AND  
13 TO PAY THEIR TAXES. IF YOU TAKE IT AWAY, A LOT OF PEOPLE WILL  
14 DISABILITIES WILL NOT BE ABLE TO GET JOBS. MORE PEOPLE WITH  
15 DISABILITIES WILL HAVE TO STAY HOME. AND THE STEREOTYPE WILL  
16 BE MORE TRUE. [ Unintelligible ] WE VOTE. WE PAY TAXES, JUST  
17 LIKE EVERYONE ELSE IN THIS COUNTY. REMEMBER THAT WHEN YOU  
18 VOTE.

19

20 **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH. [ Applause ]

21

22 **SUP. BURKE, CHAIR:** LAURA BIGBY.

23

24 **LAURA BIGBY:** GOOD AFTERNOON, LADIES AND GENTLEMEN. I HAPPEN TO  
25 BE A RETIRED NURSE, I WORK IN U.C.L.A. FOR 11 YEARS AND FOR





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1 LOS ANGELES COUNTY FOR 22 YEARS AND I RETIRE IN 1998, AND I AM  
2 SEEING ALL OUR WORK THAT ALL THE PROFESSIONALS AND EVERYBODY  
3 HAVE BEEN DONE IS GOING TO CUT JUST TODAY. I WONDER IF YOU ALL  
4 ALREADY HAVE THE IDEA HOW MANY PEOPLE ARE GOING TO BE WITHOUT  
5 SERVICES. FAMILIES AT HOME ARE UNABLE TO TAKE CARE OF ALL OF  
6 THESE PEOPLE HAVE BEEN HERE SINCE EARLY THIS MORNING,  
7 SUFFERING, EXPOSING ALL THEIR PROBLEMS. HAVE COMPASSION FOR  
8 THEM. PLEASE. DON'T CLOSE THE CLINICS. RANCHO LOS AMIGOS, FOR  
9 A HUNDRED YEARS, HAS BEEN DEMONSTRATING THE WONDERFUL WORK  
10 THAT HAS BEEN DONE FOR ALL THE PEOPLE THAT NEED IT. SOME DAY  
11 MAYBE WE ALL WILL BE THERE AND WE NEED THEM, AND, PLEASE, I  
12 ASK YOU TO CONTINUE WORKING ALL TOGETHER SO WE CAN SAVE  
13 RANCHO. THANK YOU.

14

15 **SUP. BURKE, CHAIR:** THANK YOU. I THINK THAT CONCLUDES -- I  
16 THINK THAT CONCLUDES THE HEARING. IS THERE ANYONE WHO HAD  
17 ASKED TO SPEAK THAT WE DID NOT CALL ON? THERE'S ONE OTHER  
18 PERSON.

19

20 **SUP. KNABE:** THE GENTLEMAN BACK HERE.

21

22 **SUP. BURKE, CHAIR:** THERE ARE TWO PEOPLE. THERE'S A GENTLEMAN  
23 COMING FORWARD ALSO. ALL RIGHT. WE'LL HOLD IT FOR YOU.

24



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1   **LAURA MAKI:** HI. MY NAME IS LAURA MAKI, AND I HAVE BEEN A  
2   PATIENT IN AND OUT OF RANCHO FOR THE PAST 46 YEARS. AND UNTIL  
3   I GOT TO RANCHO, MY PARENTS HAD SEARCHED FOR A DIAGNOSIS FOR  
4   MY DISABILITY FOR SIX YEARS AND COULDN'T FIND ANSWERS  
5   ANYWHERE. AT RANCHO, THEY WERE ABLE TO KEEP ME WALKING AS LONG  
6   AS THEY COULD. I HAD SIX SURGERIES, HAD TO GET A TRACH, A  
7   VENTILATOR. RANCHO IS THE ONLY HOSPITAL THAT HAS BEEN ABLE TO  
8   CARE FOR ME IN THE WAY THAT I SHOULD BE CARED FOR. THEY ASSIST  
9   ME TO REMAIN MOBILE AND AS INDEPENDENT AS I AM. CURRENTLY I'M  
10  49, QUADRIPLLEGIC, VENTILATOR DEPENDENT. I REQUIRE HELP TO  
11  BATHE ME, DRESS ME, GET ME UP, PUT ME IN BED. BUT ALSO THROUGH  
12  RANCHO, I WENT TO THE MOBILITY ENGINEERING PROGRAM, AND THEY  
13  WERE ABLE TO EVALUATE ME, AND I AM ABLE TO DRIVE, WHICH THEN I  
14  WAS ABLE TO GET A JOB. I WENT TO COLLEGE, GRADUATED, RAISED A  
15  FAMILY, FOSTER PARENTED 25 CHILDREN IN L.A. COUNTY AND IT'S  
16  ONLY BECAUSE OF RANCHO.

17

18  **SUP. BURKE, CHAIR:** MARVELOUS. GOOD FOR YOU. GOOD FOR YOU.

19

20  **LAURA MAKI:** ALL THE THINGS THAT I DID DO. I MADE VOLUNTEER OF  
21  THE YEAR, GOT AWARD FROM L.A. AND THE STATE, AND WITHOUT  
22  RANCHO, I JUST COULDN'T DO THESE THINGS. I DON'T KNOW WHAT  
23  WOULD HAPPEN. THERE'S NO CARE THAT I COULD GET ANYWHERE ELSE,  
24  AT ANY OTHER HOSPITAL, THEY DON'T UNDERSTAND SEVERE  
25  DISABILITIES, THEY DON'T LOOK AT YOU AS A PERSON, THEY LOOK AT



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1 YOU, JUST, I DON'T KNOW, NOT AS A PERSON, AND AT OTHER  
2 HOSPITALS, WHEN I GO, LIKE FOR AN EMERGENCY OR SOMETHING WHEN  
3 I CAN'T GET TO RANCHO, I GET MISDIAGNOSED, I TRY TO TELL THEM  
4 WHAT I NEED, THEY DON'T UNDERSTAND "TRACH," THEY DON'T  
5 UNDERSTAND VENTILATORS, THEY DON'T UNDERSTAND MUSCLE DISEASE,  
6 THEY DON'T UNDERSTAND CONTRACTURES, THEY DON'T UNDERSTAND ANY  
7 PART OF THE DISABILITY, SO THEY TRY TO TREAT ME LIKE EVERYONE  
8 ELSE AND THEY MOVE ME AND HURT MY ARMS, MY LEGS. THEY DO  
9 THINGS TO ME THAT THEY SHOULDN'T DO. THEY ASSUME I CAN DO  
10 THINGS I CAN'T DO AND ASSUME THAT I CAN'T DO THINGS THAT I CAN  
11 DO. BUT RANCHO IS THE ONLY PLACE THAT LOOKS AT ME AS A WHOLE  
12 PERSON AND NO OTHER FACILITY CAN DO THAT, AND TO CLOSE RANCHO  
13 REALLY WOULD BE A DETRIMENT. I DO PAY TAXES, AND NOT ONLY  
14 THAT, BECAUSE I WAS A FOSTER PARENT, I POSITIVELY AFFECTED  
15 LIVES OF THOSE OTHER CHILDREN AND WAS ABLE TO GET THEM BACK  
16 INTO THEIR HOMES AND THEIR PARENTS WERE THEN ABLE TO RAISE  
17 THEIR FAMILIES WITHOUT THEM BEING TAKEN AWAY AGAIN. SO IT'S  
18 NOT JUST ONE PERSON, ME, THAT YOU'RE AFFECTING IF YOU CLOSE  
19 RANCHO, IT'S ALL THOSE LIVES THAT WORK AT EL CAMINO COLLEGE,  
20 THE STUDENTS THAT I TEACH THERE ARE AFFECTED POSITIVELY  
21 FINALLY. SO PLEASE DON'T CLOSE RANCHO, AND I REALLY THANK DON  
22 KNABE FOR STANDING BEHIND RANCHO SO FAR. THANK YOU. [ Applause  
23 ].  
24



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1   **SUP. BURKE, CHAIR:** THANK YOU. YES, SIR. WOULD YOU STATE YOUR  
2   NAME?

3

4   **RICK FRANZ:** MY NAME IS RICK FRANZ, F-R-A-N-Z, AND I WORK FOR  
5   THE DALE MacINTOSH CENTER IN GARDEN GROVE. I LIVE IN LONG  
6   BEACH. I HAVE BEEN AN OUT-PATIENT FOR RANCHO LOS AMIGOS  
7   HOSPITAL FOR 43 YEARS. AND I AM DISTRESSED TO SEE A LOT OF THE  
8   FACES THAT ARE UP HERE ON THE BOARD. IT ALMOST LOOKS LIKE YOU  
9   -- HAVE ALMOST MADE UP YOUR MIND THAT YOU WANT TO START  
10   CLOSURE, AND BEFORE YOU VOTE ON SUCH A THING, I WOULD LIKE TO  
11   REITERATE ONE THING THAT WOULD SAID BY SEVERAL OF THE  
12   PHYSICIANS THAT CAME UP HERE AND THE PEOPLE THAT WORK IN THE  
13   EMERGENCY WARDS, AND THAT IS THAT IF YOU CLOSE RANCHO DOWN,  
14   YOU'RE CLOSING DOWN BEDS THAT NEED TO BE -- THAT NEED TO BE  
15   FILLED SOMEWHERE. RIGHT NOW, AS WAS STATED EARLIER, PEOPLE  
16   WAIT FIVE -- FROM A HALF A DAY TO THREE DAYS IN THE EMERGENCY  
17   ROOM FOR TREATMENT. YOU DO THIS, YOU'RE GOING TO BE HAVING  
18   WAITS A LOT LONGER THAN THAT, AND WHEN THIS HAPPENS, IT MIGHT  
19   NOT BE ONE OF US THAT ENDS UP DYING BECAUSE OF THIS, IT COULD  
20   BE YOUR RELATIVES, IT COULD BE ANYBODY HERE, AND BECAUSE OF  
21   THIS, THIS IS WHY WE NEED TO KEEP RANCHO OPEN. WE NEED TO FIND  
22   ANY WAY THAT WE CAN TO KEEP IT OPEN. I REALIZE THAT WE HAVE A  
23   BUDGET CRUNCH AND I REALIZE THAT TIMES ARE HARD AND YOU HAVE A  
24   LOT OF HARD DECISIONS TO MAKE, BUT THERE'S A LOT OF LIVES AT  
25   STAKE AND WHEN THERE'S LIVES AT STAKE, THERE'S GOT TO BE OTHER



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1 WAYS OF WORKING THINGS OUT. SO I THANK YOU FOR YOUR TIME, AND  
2 PLEASE, PLEASE, BEFORE YOU VOTE TO CLOSE RANCHO, FIND IT IN  
3 YOUR HEART TO TRY TO FIGURE OUT ANOTHER WAY. PEOPLE'S LIVES  
4 ARE AT STAKE. THANK YOU VERY MUCH. [ Applause ]

5

6 **SUP. BURKE, CHAIR:** THANK YOU.

7

8 **HARVEY RUBENSTEIN:** MY NAME IS HARVEY RUBENSTEIN. I LIVE IN  
9 LONG BEACH. MY BACKGROUND IS THAT I HAD A BRAIN TUMOR AND DUE  
10 TO NO CIRCUMSTANCE SPECIAL, BUT I HAD AN OCCURRENCE IN 75. I  
11 ATTENDED RANCHO IN '76 DUE TO SOME VERY SOPHISTICATED MEDICAL  
12 PERSONNEL WHO KNEW WHERE I SHOULD GO. I WAS A PATIENT THERE  
13 FOR THREE MONTHS. BY A PATIENT'S PERSPECTIVE, AT LEAST THIS  
14 ONE, IT IS NO COUNTRY CLUB. IT REALLY WORKED. I WORKED SO  
15 HARD. MY PARENTS SAID THAT, "IF YOU WORK HARD ENOUGH, YOU'LL  
16 GET OUT OF THIS PLACE," SO CONSEQUENTLY, I WORKED REALLY HARD  
17 TO GET OUT AND WORKED REALLY, REALLY HARD NEVER TO GO BACK  
18 EXCEPT FOR MEETINGS. PRESENTLY I AM GLAD TO SAY THAT I AM  
19 MARRIED, I HAVE TWO CHILDREN WHO I'VE BEEN -- WILL EVENTUALLY  
20 BEING TAX-PAYING MEMBERS OF OUR SOCIETY, AND THEY'VE ALSO  
21 LEARNED WHAT DISABILITY IS ABOUT AND THE FACT THAT IT'S NOT  
22 SOMETHING THAT CAN BE SCARED OF, IT'S SOMETHING THAT YOU CAN  
23 DEAL WITH, YOU CAN DEAL WITH IT. I KNOW THAT MY WIFE IS ALSO  
24 DISABLED. IT'S REALLY INTERESTING. HER PARENTS HAD GROWN UP IN  
25 THE ERA THAT DISABILITY WAS SOMETHING THAT SHOULD NEVER BE



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1 SEEN BY ANYONE ELSE, THAT THEY SHOULD ALWAYS DO EVERYTHING FOR  
2 HER, AND SO AS A RESULT, SHE IS NOT ABLE, OR AT LEAST NOT  
3 WILLING TO DO STUFF FOR HERSELF INDIVIDUALLY, AND HER PARENTS,  
4 UNFORTUNATELY, HAVE PASSED ON, WHICH MEANS THAT WE'RE ALL HERE  
5 TO PICK UP THE SLACK THAT THEY DID, WHICH IS REAL INTERESTING.  
6 YOU PROBABLY SEE ME AS A PHYSICALLY DISABLED PERSON. I'M DOING  
7 ALL THIS STUFF FOR THE WHOLE FAMILY AND LOOKS LIKE SHE'S  
8 EMOTIONALLY DISABLED AND PHYSICALLY DISABLED, LIKE THESE  
9 PEOPLE ARE LOOKING AROUND LIKE, WOW, ISN'T SHE NICE TO BE, YOU  
10 KNOW, HIS WIFE. SO ANYWAY, I JUST WANTED TO SAY THAT TO ME,  
11 RANCHO HAS BEEN A WONDERFUL THING. I LOOK BACK ON IT NOW THAT  
12 THAT WAS THE GREATEST THING THAT I COULD HAVE POSSIBLY BEEN  
13 PUT INTO AND IT'S THE FIRST PLACE IF ANYTHING EVER HAPPENED TO  
14 ME, THAT I WOULD WANT TO GO BACK TO AGAIN BECAUSE THEY DID  
15 SUCH A WONDERFUL JOB. AND SO I'M JUST HERE JUST TO SAY TO YOU,  
16 RECONSIDER YOUR OPINIONS AND TO NOT CLOSE RANCHO. LOOK AT  
17 OTHER ALTERNATIVES. THANK YOU. [ Applause ].

18

19 **SUP. BURKE, CHAIR:** THANK YOU VERY MUCH. I HAVE NOT BEEN  
20 INFORMED -- IS THERE ANYONE ELSE WHO WISHES TO SPEAK? I HAVE  
21 NOT BEEN INFORMED THAT THERE'S ANYONE IN ADDITION, SO THAT  
22 CONCLUDES THE HEARING. THE COUNTY COUNSEL CAN ADVISE US OF THE  
23 NEXT THING. I BELIEVE WE HAVE A RECOMMENDATION.

24

25 **SPEAKER:** HE HAVE A MOTION AS WELL, TOO.



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1

2 **SUP. BURKE, CHAIR:** SHALL WE ASK THE STAFF TO COME BACK?

3

4 **SPEAKER:** SUPERVISOR BURKE, IT WOULD NOW BE APPROPRIATE FOR YOU  
5 TO CLOSE THE PUBLIC HEARING AND DELIBERATE WITH YOUR  
6 COLLEAGUES AND TAKE A VOTE ON THE RECOMMENDATION IN FRONT OF  
7 YOU.

8

9 **SUP. BURKE, CHAIR:** IS THERE A MOTION TO CLOSE THE HEARING?

10

11 **SPEAKER:** MOVED.

12

13 **SUP. BURKE, CHAIR:** IT'S BEEN MOVED AND SECONDED THAT THE  
14 HEARING BE CLOSED. WITHOUT OBJECTION, THE HEARING IS CLOSED.  
15 WE HAVE BEFORE US --

16

17 **SUP. YAROSLAVSKY:** COULD WE HAVE THE STAFF TO COME BACK?

18

19 **SUP. BURKE, CHAIR:** THE RECOMMENDATION OF THE STAFF. [ Mixed  
20 Voices ]

21

22 **SUP. KNABE:** MADAME CHAIR, IF I COULD, I HAVE A MOTION THAT I  
23 WOULD LIKE TO PUT OUT ON THE TABLE, BUT I ALSO HAVE SOME  
24 QUESTIONS FOR MR. GARTHWAITE, IF YOU DON'T MIND, AT LEAST PUT  
25 THE MOTION OUT THERE SO THAT WE'LL HAVE SOMETHING TO DISCUSS.





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1 OBVIOUSLY IT'S BEEN A LONG DAY FOR EVERYONE AND IT'S PRETTY  
2 AMAZING SOME OF THE TESTIMONY, NOT REALLY DEMANDS, BUT JUST A  
3 DESIRE FOR INDEPENDENCE, AND I THINK THAT'S PRETTY INCREDIBLE.  
4 BUT THE FINANCIAL CRISIS FACING OUR HEALTH SYSTEM IS IMMENSE  
5 AND MUST BE DEALT WITH BY THE BOARD TO AVERT A FINANCIAL  
6 DISASTER FOR THE ENTIRE COUNTY TO PRESERVE A SAFETY NET FOR  
7 THE COUNTY'S MOST VULNERABLE. WHILE I DISAGREE WITH THE  
8 RECOMMENDATION OF THE DEPARTMENT TO CLOSE RANCHO, I RECOGNIZE  
9 THAT THE CRISIS BEFORE US IS REAL AND CANNOT BE IGNORED.  
10 HOWEVER, THERE ARE OPTIONS OTHER THAN CLOSING RANCHO THAT CAN  
11 PRESERVE THE VITAL SERVICES IT PROVIDES TO THE COMMUNITY. AT  
12 THE SAME TIME, TRANSITION IT OFF THE COUNTY'S BOOKS.  
13 CALIFORNIA COMMUNITY FOUNDATION RETAINED GILL BASANO A  
14 NATIONALLY RECOGNIZED HEALTHCARE CONSULTING FIRM, THAT  
15 SPECIALIZES IN REHABILITATION ISSUES. THE REPORT INDICATES  
16 THAT IF RANCHO WERE TO CLOSE, THERE WOULD BE A DEFICIT OF  
17 REHABILITATION BEDS IN THIS COUNTY AND THERE WOULD BE NO  
18 EXISTING FACILITY THAT HAS THE PROGRAMS AND SPECIALTY THAT  
19 RANCHO HAS. CALIFORNIA COMMUNITY FOUNDATION HAS RELAYED TO US  
20 THAT THEY FEEL THAT WITH INCREASED COMMUNITY SUPPORT, RANCHO  
21 MAY AND COULD BE ABLE TO CONTINUE TO PROVIDE IMPORTANT  
22 SERVICES TO THE COMMUNITY AS A NONPROFIT ENTITY THAT IS NO  
23 LONGER DIRECTLY OWNED AND OPERATED BY THE COUNTY. THE AT THE  
24 SAME TIME, THE DEPARTMENT OF HEALTH SERVICES CLINICIANS AND  
25 ADMINISTRATORS HAVE BEEN COLLABORATING TO DESIGN A



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1 SUBSTANTIALLY DOWN-SIZED RANCHO THAT PRESERVES CRITICAL  
2 REHABILITATION SERVICES, BUT CUTS IT'S BUDGET IN NONESSENTIAL  
3 SERVICES AND CONSOLIDATED MANAGEMENT. IT IS ESTIMATED THAT  
4 THIS OPTION COULD COST AN ADDITIONAL 10 TO 20 MILLION DOLLARS  
5 ANNUALLY OVER THE 14.7 MILLION DOLLARS ONGOING CONTRIBUTION  
6 THAT THE DEPARTMENT FORESEES TO SUPPORT THE OPERATION OF  
7 RANCHO AS IT TRANSITIONS TO A NOT-FOR-PROFIT. OR AS A  
8 SATELLITE OPERATION OR TO PURCHASE REHABILITATION CARE ON THE  
9 PRIVATE MARKET COMMENCING THE FISCAL YEAR '04/'05. THIS WOULD  
10 ALSO PROVIDE NEW SAVINGS TO THE COUNTY IN FISCAL YEAR '03/'04.  
11 THIS WOULD ALLOW THE TIME IT IS ESTIMATED THE TRANSITION TO  
12 NONPROFIT WOULD TAKE AND THE PHILANTHROPIC COMMUNITY MIGHT  
13 UNDERWRITE PART OR ALL OF THESE ADDITIONAL COSTS. SO, ONE, I  
14 WOULD THEREFORE MOVE THAT WE INSTRUCT DEPARTMENT OF HEALTH  
15 SERVICES TO REPORT BACK IN 10 DAYS WITH A BUDGET AND  
16 PROGRAMMATIC DESIGN FOR A DOWNSIZED RANCHO. TWO, THAT WE  
17 ACCEPT THE CALIFORNIA COMMUNITY FOUNDATIONS OFFER OF  
18 UNDERWRITING THE SERVICES OF THE GILL BASANO CONSULTING TO  
19 COMPLETE A FEASIBILITY STUDY ON THE TRANSITION OF RANCHO TO A  
20 FREESTANDING NONPROFIT ENTITY AND REPORT BACK IN 45 DAYS.  
21 THREE, AS YOU HEARD FROM THE CITY OF DOWNEY, INSTRUCT THE  
22 C.A.O. TO REPORT BACK TO THE BOARD IN 30 DAYS REGARDING  
23 ACCELERATED DEVELOPMENT OF UNDERDEVELOPED LAND ON RANCHO  
24 CAMPUS, BOTH NORTH AND SOUTH, WITH REGARD TO LEASE SALE  
25 OPPORTUNITIES TO HELP FINANCE THE OPERATIONS OF A DOWN-SIZED



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1 RANCHO ON THE ONE-TIME COST OF TRANSITION TO A NONPROFIT. ALSO  
2 INSTRUCT THE C.A.O. TO WORK WITH D.H.S TO ALLOW RANCHO TO  
3 UTILIZE THE REVENUE FROM EXISTING LEASES ON THE RANCHO CAMPUS  
4 TO HELP OFFSET DOWNSIZED COSTS. AND FINALLY, FOUR, TO REPORT  
5 BACK BY MARCH 18 ON THE FEASIBILITY STUDY RESULTS AND POSSIBLE  
6 NEXT STEPS FOR RANCHO TO TRANSITION TO A NONPROFIT ENTITY IN  
7 LIEU OF CLOSURE. THAT'S A MOTION. I'M NOT SURE WHETHER THERE'S  
8 A SECOND OR NOT FOR DISCUSSION, BUT IT'S OUT THERE. THE  
9 QUESTION I HAVE, THOUGH, TO MR. GARTHWAITE, IS UNDER YOUR  
10 BUDGET CHART, AND I'M TALKING ABOUT THE NEW SAVINGS THAT I WAS  
11 REFERRING TO IN MY MOTION, UNDER YOUR BUDGET CHART, TO ADDRESS  
12 THE DEPARTMENT'S STRUCTURAL DEFICIT, IT APPEARS, OR ISN'T IT  
13 TRUE THAT NO SAVINGS WERE COUNTED ON OR ANTICIPATED FOR FISCAL  
14 YEAR '03/'04?

15

16 **DR. THOMAS GARTHWAITE:** THAT IS CORRECT, UP UNTIL THE OCTOBER  
17 DISCUSSION, THAT'S CORRECT.

18

19 **SUP. KNABE:** AND SO UNDER SOME PRELIMINARY BUDGET NUMBERS, YOUR  
20 DEPARTMENT HAS LOOKED AT A DOWN-SIZED RANCHO THAT, AS I  
21 MENTIONED IN MY MOTION, INDICATED A COST OF 10 TO \$20 MILLION  
22 BEYOND THE 14.7 FOR '05 SCHEDULED SUBSIDY? THIS NEXT YEAR,  
23 ISN'T IT TRUE THAT YOU COULD SAVE \$38 MILLION?

24



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1 **DR. THOMAS GARTHWAITE:** IF WE OPERATED A SMALLER RANCHO AS A  
2 SUBUNIT OF FOR INSTANCE L.A.COUNTY U.S.C, WE BELIEVE WE WOULD  
3 NEED THE 14.7 MILLION WE ORIGINAL HAD TALKED ABOUT PLUS  
4 SOMEWHERE BETWEEN 10 AND 20 MILLION. WE'RE STILL WORKING THOSE  
5 NUMBERS. WHAT THE BOARD VOTED ON OCTOBER 29 WAS SAVINGS OF  
6 58.6, SO YOU'D HAVE TO TAKE THE 10 OR 20 MILLION FROM THAT  
7 SAVINGS. WE'D STILL REALIZE SOME SAVINGS.

8

9 **SUP. KNABE:** IN OTHER WORDS, WE COULD --

10

11 **DR. THOMAS GARTHWAITE:** 38 TO 48.

12

13 **SUP. KNABE:** SO IF YOUR NUMBERS HOLD UP IN REGARDS TO A DOWN-  
14 SIZED RANCHO, THAT THE COUNTY COULD SAVE AN ADDITIONAL 45  
15 MILLION, IN FISCAL YEARS '04/'05. SO IN OTHER WORDS OVER THE  
16 TWO FISCAL YEARS YOU HAVE IN ESSENCE ABOUT 18 MILLIONS MORE  
17 THAN YOU ANTICIPATED ORIGINALLY FOR '04/'05.

18

19 **DR. THOMAS GARTHWAITE:** RIGHT, THE ASSUMPTIONS FROM JUNE  
20 THROUGH OCTOBER 29TH, YES [ Unintelligible ].

21

22 **SUP. KNABE:** SO WHAT I'M SAYING IS IT REALLY IS A VIABLE OPTION  
23 BOTH IN TERMS OF SERVICE TO THE COMMUNITY TO ATTEMPT TO  
24 TRANSITION RANCHO TO A NOT-FOR-PROFIT HOSPITAL.

25



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1 **DR. THOMAS GARTHWAITE:** BEGINNING OCTOBER 29, WE DID INCLUDE  
2 THE 58.6 OF THE EARLY CLOSURE IN RANCHO IN MANY OF OUR OTHER  
3 DISCUSSIONS.

4

5 **SUP. KNABE:** BUT THAT 58 WAS THROUGH '04/'05. IS THAT CORRECT?  
6 THE ONLY THING YOU DID WAS ACCELERATE THE ONE TIME COSTS UP  
7 FRONT

8

9 **DR. THOMAS GARTHWAITE:** THE ONE-TIME EXTRA SAVINGS OF 58.6,  
10 THAT'S CORRECT.

11

12 **SUP. KNABE:** BUT IF THE NUMBERS, AS IT RELATES TO DOWNSIZING  
13 AND TRANSFERRED NOT-FOR-PROFIT, OVER THE TWO YEARS YOU WOULD  
14 HAVE MORE SAVINGS THAN YOU ANTICIPATED, ACCORDING TO YOUR  
15 NUMBERS.

16

17 **DR. THOMAS GARTHWAITE:** I'M NOT SURE I FOLLOW THAT. COMPARED TO  
18 THE JUNE REPORT, WE STILL WOULD REALIZE ADDITIONAL SAVINGS  
19 FROM THE JUNE REPORT, YES, IF THAT'S YOUR QUESTION.

20

21 **SUP. BURKE, CHAIR:** IS THERE ANY OTHER DISCUSSION OR ANY OTHER  
22 -- FIRST OF ALL, IS THERE A SECOND TO THE MOTION? I CERTAINLY  
23 AM WILLING TO TAKE VERY SERIOUS -- VERY SERIOUS LOOK AT THE  
24 CONVERSION AND IN YOUR MOTION, THE FIRST AND THE SECOND PART  
25 OF THAT MOTION, I WOULD BE SUPPORTIVE OF, BUT I DO BELIEVE



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1 THAT WE SHOULD ALSO HAVE SOME OTHER MOTION AS IT RELATES TO  
2 THE STAFF REPORT AND THEN TO LOOK AT THIS AS AN AMENDMENT TO  
3 THAT MOTION IN ORDER TO GIVE SOME ABILITY TO EVALUATE THE  
4 PRIVATE CONVERSION, BECAUSE I REALLY BELIEVE IT CAN BE VERY  
5 SUCCESSFUL AS A NONPROFIT HOSPITAL. OTHERS ARE SUCCESSFUL.  
6 THEY OBVIOUSLY HAVE THE ABILITY TO RAISE MONEY. THEY WOULD BE  
7 ABLE TO GET PRIVATE PATIENTS. HOWEVER, I DON'T KNOW THAT WE  
8 CAN PUT OURSELVES IN A TOTAL DISADVANTAGE AND PUT THE ENTIRE  
9 SYSTEM AT RISK WHILE WE LOOK AT THAT, BUT I DO THINK THAT WE  
10 HAVE A RESPONSIBILITY TO TRY TO MAINTAIN RANCHO AND TO  
11 MAINTAIN IT AS A NONPROFIT. THERE'S NO REASON IT CAN'T OPERATE  
12 THAT WAY. IN THE MOTION THAT YOU HAVE, ONE OF THE AREAS THAT I  
13 DON'T QUITE UNDERSTAND IS TO INSTRUCT THE C.A.O. TO WORK WITH  
14 D.H.S. TO ALLOW RANCHO TO UTILIZE THE REVENUE FROM EXISTING  
15 LEASES ON THE RANCHO CAMPUS TO OFFSET, DOWNSIZE COSTS. WHEN  
16 WERE YOU ANTICIPATED THAT THOSE FUNDS WOULD BE USED TO OFFSET  
17 COSTS.

18

19 **SUP. KNABE:** EXISTING LEASES ON THE PROPERTY RIGHT NOW THAT GO  
20 INTO THE GENERAL FUND. THIS IS -- I ASKED FOR TWO THINGS. ONE  
21 IS THE ACCELERATED POTENTIAL DEVELOPMENT LEASE OR SALE OPTIONS  
22 OF PROPERTY -- UNDEVELOPED. THERE ARE EXISTING PROPERTIES ON  
23 THE CAMPUS RIGHT NOW ON THE SOUTH CAMPUS THAT ARE OTHER  
24 REVENUE SOURCES FOR THE COUNTY. CORRECT, DAVID?

25



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1   **C.A.O. JANSSEN:** BUT THEY'RE ALREADY INCLUDED IN THE BUDGET,  
2   SOME OTHER PART OF THE BUDGET WOULD BE SUBSIDIZING THE  
3   TRANSITION. RIGHT.

4

5   **SUP. BURKE, CHAIR:** SO WHAT YOU'RE ANTICIPATING IS THAT WHEN  
6   THE OTHER PORTIONS OF THE UNDEVELOPED LAND ARE EITHER LEASED  
7   OR SOLD, THAT THOSE FUNDS BE SET ASIDE FOR THE OPERATION OF  
8   RANCHO, WHETHER IT'S NONPROFIT OR WHETHER -- OR WHATEVER --

9

10   **SUP. KNABE:** IN OTHER WORDS, I'M ASKING FOR THE C.A.O. TO  
11   REPORT BACK. I MEAN.. THAT'S THE QUESTION, TO HAVE THE ABILITY  
12   TO DO THAT AND THE IMPACT OF THAT. AS IT RELATES, YOU KNOW,  
13   BECAUSE WE'RE GOING TO HAVE TO HAVE A REPORT BACK BECAUSE  
14   THERE'S SIGNIFICANT UNDEVELOPED PROPERTY OUT THERE ON BOTH  
15   CAMPUSES, BUT AS IT RELATES TO IF YOU'RE ADVOCATING CLOSURE,  
16   VOTING FOR CLOSURE AND THEN STILL TRYING TO DO THESE OTHER  
17   THREE OR FOUR THINGS, I MEAN OBVIOUSLY WE CONTINUE THE ISSUE  
18   WE HAVE TO DEAL WITH IS WHAT'S THE VALUE OF RANCHO AS YOU MOVE  
19   FORWARD ON CLOSURE VERSUS RANCHO STAYING OPEN AS YOU  
20   INVESTIGATE THESE THINGS FOR A MERE 45 DAYS.

21

22   **SUP. BURKE, CHAIR:** WELL, I DON'T KNOW THAT ANYONE WAS  
23   ANTICIPATING IT BEING CLOSED WITHIN 45 DAYS. I MEAN, THAT WAS  
24   NEVER BEFORE US AS FAR AS I KNOW [ Inaudible ].

25





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1    **SUP. YAROSLAVSKY:** MADAM CHAIR, JUST TELL YOU MY PERSPECTIVE ON  
2    THIS. FIRST OF ALL, I DON'T THINK ANYBODY UP HERE LIKES BEING  
3    PUT IN THIS POSITION, AND ALL OF US HAVE BEEN AT RANCHO MORE  
4    THAN ONCE, ARE WELL AWARE OF THE GOOD WORK THAT THE DOCTORS  
5    AND THE NURSES, PHYSICAL REHABILITATION SPECIALISTS DO THERE.  
6    AS POIGNANT AND AS POWERFUL AS THE TESTIMONY IS, I THINK  
7    EVERYONE IS AWARE OF THESE AND MANY OTHER STORIES THAT HAS  
8    COME OUT OF RANCHO, BUT WE'RE NOT -- IN A SENSE, WE'RE NOT  
9    MASTERS OF OUR OWN DESTINY. AS YOU KNOW, JUST A FEW MONTHS  
10    AGO, IN JUNE, WE WERE HERE TALKING ABOUT CLOSING HARBOR-  
11    U.C.L.A. MEDICAL CENTER AND OLIVE VIEW MEDICAL CENTER AND  
12    SYLMAR. ONE, AS MR. KNABE WAS VERY QUICK AND PROPER TO REMIND  
13    US, THE ONLY LEVEL ONE TRAUMA CENTER IN THE SOUTH BAY AND THE  
14    OTHER, AS MR. ANTONOVICH AND I WERE QUICK TO REMIND EVERYBODY,  
15    THE BUSIEST EMERGENCY ROOM IN THE SAN FERNANDO VALLEY. WE WERE  
16    FACED WITH THAT PREDICAMENT AND THE CLOSURE OF RANCHO, IF MY  
17    MEMORY SERVES ME CORRECTLY, ALL THREE WERE ON THE TABLE, PLUS  
18    THE CLOSURE OF HIGH DESERT HOSPITAL, WHICH WE DID VOTE TO  
19    CLOSE ON THE SAME BASIS THAT YOU'RE RECOMMENDING WE CLOSE THIS  
20    NOW. DID WE WANT TO CLOSE HIGH DESERT? THE ONLY COUNTY  
21    HOSPITAL NORTH OF THE SAN FERNANDO VALLEY? DID WE WANT TO  
22    CLOSE THE ONLY HOSPITAL IN THE ANTELOPE VALLEY WHERE WE HAVE A  
23    SERIES OF AUTO ACCIDENTS TO END ALL AUTO ACCIDENTS EVERY  
24    WEEKEND AND EVERY DAY? NO. DID WE WANT TO CLOSE THE OTHER TWO  
25    HOSPITALS THAT I MENTIONED? NO. DO WE WANT TO CLOSE RANCHO?



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1 NO. WE DON'T. BUT WHEN I WALKED INTO THE BUILDING THIS  
2 MORNING, MR. JANSSEN INFORMED ME, AS I'M SURE HE INFORMED MY  
3 COLLEAGUES, THAT NEGOTIATIONS SUCH AS THEY HAVE BEEN OVER THE  
4 LAST FEW MONTHS AND WEEKS HAVE TAKEN A TURN FOR THE WORSE  
5 TODAY WITH THE FEDERAL GOVERNMENT AS A PROBLEM, AS A HOLDUP,  
6 GOING TO BE 10 MORE HOLDUPS BEFORE ANYTHING IS RESOLVED, IF  
7 ANYTHING IS RESOLVED. WE ARE WELL AWARE OF THE -- OF BOTH THE  
8 BUSH AND THE DAVIS ADMINISTRATIONS' ATTITUDES TOWARDS THIS  
9 COUNTY AND TOWARDS OUR OBLIGATIONS AND THE FINANCIAL PRESSURES  
10 AND CONSTRAINTS THEY HAVE PUT ON US IN THAT REGARD, WHICH IS  
11 WHY WE'RE HERE TO BEGIN WITH. IN JUNE, WE MADE A -- MR. -- DR.  
12 GARTHWAITE GAVE US A PLAN. WE ASKED HIM FOR A PLAN MONTHS  
13 BEFORE THAT. JUNE, HE PRESENTED US WITH A PLAN. IT WAS NOT A  
14 PRETTY PLAN. IT WAS A PLAN THAT GOT US TO BALANCE SO THAT THE  
15 CORE MISSION THAT WE HAVE TO PROVIDE THE CORE MEDICAL  
16 SERVICES, EMERGENCY TRAUMA AND AMBULATORY CARE SERVICES TO OUR  
17 UNINSURED POPULATION WOULD NOT BE JEOPARDIZED. THAT WAS THE  
18 BASIS, CORRECT ME IF I AM WRONG, THE BASIS OF YOUR  
19 RECOMMENDATION. NOW HERE WE ARE, WE PLACED AS A LAST DITCH  
20 DESPERATE EFFORT, MAJORITY OF THIS BOARD PUT MEASURE B ON THE  
21 BALLOT FOR NOVEMBER. IT WAS A HAIL MARY TO END ALL HAIL MARYS,  
22 AND LIKE DOUG FLUTIE'S HAIL MARY, IT CONNECTED AND PEOPLE  
23 VOTED TO ASSESS THEMSELVES A PROPERTY TAX. AND THE PASSAGE OF  
24 MEASURE B LAST NOVEMBER, IN PARTNERSHIP WITH LOCAL 6606



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1 S.C.I.U., WITHOUT THIS THING WOULDN'T HAVE HAPPENED -- [

2 Applause ].

3

4 **SUP. YAROSLAVSKY:** -- ALL THE CREDIT THEY DESERVE ON THAT,  
5 WITHOUT THE PASSAGE OF MEASURE B, WE WOULDN'T BE TALKING JUST  
6 ABOUT RANCHO TODAY. IN FACT TWO MONTHS AGO, WE WOULD HAVE BEEN  
7 TALKING ABOUT THE CLOSURE OF THE OTHER TWO HOSPITALS AS WELL.  
8 SO THE PASSAGE EVER THAT MEASURE HAS, AS IN ALL LIKELIHOOD,  
9 DEPENDING ON WHAT HAPPENS WITH THE NEGOTIATIONS WITH THE  
10 GOVERNMENT AND THE STATE IN HOURS AND DAYS AHEAD MAY HAVE  
11 SAVED TWO KEY HOSPITALS IN OUR SYSTEM, BUT IT DIDN'T INCLUDE  
12 THIS PIECE OF IT. NOW, MADAM CHAIR, I ASKED MR. SHAIKLEY, WHEN  
13 HE CAME UP HERE, I MET WITH HIM FOR AN HOUR, HOUR AND A HALF  
14 YESTERDAY IN MY OFFICE WITH DR. GARTHWAITE AND DAVID JANSSEN  
15 AND MY STAFF, AND WE WENT OVER SCENARIOS HOW QUICKLY HE  
16 THOUGHT, AS HE INDICATED HERE TODAY, THAT THERE IS POTENTIAL  
17 CHARITABLE FOUNDATION INTEREST IN FUNDING A SOLUTION HERE, BUT  
18 THE CRITICAL ELEMENT THAT I SEE, AND I RAISED IT IN THE  
19 QUESTIONS TODAY OF MR. SHAIKLEY, IS THIS TRANSITION PERIOD. IF  
20 WE DON'T VOTE TO CLOSE TODAY, I MEAN, WE'RE BETWEEN A ROCK AND  
21 A HARD PLACE. IF WE VOTE TO CLOSE, THE PRESSURE IS ON FOR  
22 EVERYBODY WHO HAS AN INTEREST IN BRINGING SOME PRIVATE  
23 NONPROFIT APPROACH TO THIS TO GET IT DONE. HE SAID 60 DAYS. I  
24 WOULD SAY IN 30 TO 60 DAYS TO SEE IF THERE IS A CRITICAL MASS  
25 OF FUNDING THAT CAN GET US A TRANSITIONAL FUNDING TO SET IT



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1 UP. IF WE BACK OFF DR. GARTHWAITE'S RECOMMENDATION TODAY, THEN  
2 THE PRESSURE IS OFF. NOW, THAT'S NOT A SPECULATION ON MY PART.  
3 WE'VE BEEN DOWN THIS ROAD, ESPECIALLY WITH RANCHO BEFORE, AND  
4 WE HAVE CONSISTENTLY, AND I'VE SAID THIS PRIVATELY TO DR.  
5 GARTHWAITE AND I'M GOING TO DO SAY IT PUBLICLY HERE TODAY, WE  
6 HAVE CONSISTENTLY BEEN, AS IT RELATES TO RANCHO, BEEN PUT IN  
7 THE POSITION BY THE RANCHO STAFF, EXECUTIVE MANAGEMENT STAFF,  
8 IN MY OPINION, AND PARENTHETICALLY BOTH THE BLUE STUDY AND  
9 SHAIKLEY STUDY COME TO ONE -- IF THEY DON'T AGREE ON ANYTHING  
10 ELSE, THEY AGREE ON ONE THING, WE OUGHT TO FOCUS ON MANAGEMENT  
11 AT RANCHO, AND I WOULD HOPE THAT YOU TAKE THAT -- THAT THE  
12 MANAGEMENT OF D.H.S. TAKES THAT TO HEART. THERE IS A PROBLEM.  
13 YOU'VE GET A PROBLEM. WE'VE ALL GOT A PROBLEM. AND THE  
14 VERACITY OF THE INFORMATION THAT ALL OF THESE CONSULTANTS AND  
15 WE HAVE BEEN GETTING OVER THE YEARS I THINK LEAVES A LOT TO BE  
16 DESIRED. SO WE HAVE ALWAYS BEEN PUT IN THE POSITION OF STATUS  
17 QUO OR SHUT DOWN. STATUS QUO OR SHUT DOWN. I DON'T LIKE BEING  
18 PUT IN THAT POSITION, BUT YOU HAVEN'T BEEN ABLE TO, AND  
19 NEITHER HAS YOUR PREDECESSOR. WAS YOUR PREDECESSOR ABLE TO  
20 GIVE US BETTER SET OF OPTIONS? BECAUSE I THINK YOU'RE CAPTIVE  
21 TO A STRATEGY SAYING "THEY'LL NEVER SHUT US DOWN, SO LET'S  
22 JUST STONEWALL THEM." AND THAT'S AN UNFORTUNATE SITUATION. NOW  
23 I BELIEVE THERE IS ANOTHER ALTERNATIVE. I REALLY DO BELIEVE  
24 THERE'S ANOTHER ALTERNATIVE, AND I THINK SHAIKLEY'S  
25 ALTERNATIVE IS ONE OF THEM, AND IT MAY BE THE BEST ONE. BUT IF



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1 IT'S GOING TO HAPPEN, EVERYBODY'S GOT TO BELIEVE THAT THEY'VE  
2 GOT TO MAKE IT HAPPEN, AND FOR US NOT TO PROCEED IN THE EVENT  
3 THAT SHAIKLEY'S OPTION DOESN'T COME TO PASS, THAT'S THE FLIP  
4 SIDE OF THE QUESTION YOU WERE ASKING. YOU WERE ASKING HOW MUCH  
5 WAS THE SAVINGS, MORE SAVINGS, LESS SAVINGS, WHATEVER THE  
6 SAVINGS IS, THE QUESTION THAT I WOULD ASK IS, WHAT HAPPENS IF  
7 THE NONPROFIT APPROACH, IF WE TRY IT AND IT FAILS AND IT  
8 DOESN'T HAPPEN, THEN WE HAVE ON OUR HANDS A DEFICIT THAT MAY  
9 PUT IN JEOPARDY HARBOR, OLIVE VIEW, KING, MORE BEDS AT COUNTY  
10 U.S.C. EVERYTHING IS IN JEOPARDY, AND THAT'S WHAT WE'VE GOT TO  
11 AVOID. THAT SCENARIO IS WHAT WE HAVE TO AVOID. SO WHEN I  
12 ASKED, AND I'LL CONCLUDE WITH THIS, I ASKED MR. SHAIKLEY HOW  
13 MUCH TIME HE NEEDS TO TAKE THE TEMPERATURE OF THE CHARITABLE -  
14 - YESTERDAY HE SAID TO ME IN MY OFFICE, I DON'T THINK I'M  
15 BETRAYING A CONFIDENCE, I DON'T THINK HE'D MIND MY SAYING, HE  
16 SAID, "I'D PICK UP THE PHONE AND MAKE A DOZEN CALLS." HE'S THE  
17 GUY THAT CAN MAKE A DOZEN CALLS TO FOUNDATIONS AND GET THEM  
18 RETURNED THE SAME DAY. HE GAVE HIMSELF ON THE OUTSIDE TODAY 60  
19 DAYS. I THINK YOU GET A GOOD TEMPERATURE READING IN 30 DAYS.  
20 IF WE VOTE TO CLOSE TODAY, DR. GARTHWAITE, WHEN WOULD THE --  
21 WHEN DO WE GET TO THE POINT OF NO RETURN? WHAT IS THAT -- FROM  
22 TODAY FORWARD, WHAT IS THE POINT OF NO RETURN? WHEN DO YOU  
23 START CLOSING, LAYING OFF PEOPLE, THAT SORT OF THING?  
24



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1   **DR. THOMAS GARTHWAITE:** IF WE WERE TO CONSIDER [Unintelligible]  
2   ] THAT HAD TO BE FINISHED BY JUNE 30, THERE ARE PLENTY OF GOOD  
3   REASONS WHY IF WE WERE TO CLOSE RANCHO, WE WOULD WANT TO DO IT  
4   BY JUNE 30 IN TERMS OF REGULATIONS, SPECIAL PAYMENTS. DISTRICT  
5   PAYMENTS [Unintelligible ] THERE'S A COMPLEX BUT IMPORTANT  
6   REASON WHY WE WOULDN'T WANT TO GO BEYOND THAT DATE. THEN WE  
7   WOULD HAVE TO BEGIN A CASCADE PROBABLY BY APRIL 15 OR A LITTLE  
8   BEFORE.

9

10   **SUP. YAROSLAVSKY:** APRIL 15.

11

12   **DR. THOMAS GARTHWAITE:** THAT WOULD REQUIRE US TO PROBABLY RUN  
13   TWO CASCADES TO MEET ALL THE OBLIGATIONS OR DELAY THE ONE WE  
14   PLANNED --

15

16   **SUP. YAROSLAVSKY:** THAT'S ABOUT 3-1/2 MONTHS AWAY. IS THAT  
17   RIGHT?

18

19   **DR. THOMAS GARTHWAITE:** 70 DAYS AWAY.

20

21   **SUP. YAROSLAVSKY:** 70 DAYS FROM FEBRUARY 7.

22

23   **DR. THOMAS GARTHWAITE:** YES.

24



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1    **SUP. YAROSLAVSKY:** OR 80 SOME ODD DAYS FROM NOW. IT'S MORE THAN  
2    60 DAYS. SO WHAT I WOULD SUGGEST IS THAT WE APPROVE THE STAFF  
3    RECOMMENDATION. I THINK THIS IS WHAT YOU WERE LEADING TO,  
4    MADAM CHAIR, IS THAT WE APPROVE THE STAFF RECOMMENDATION, BUT  
5    THAT WE LAY ON THE TABLE THE MARKER THAT MR. SHAIKLEY, WE TAKE  
6    MR. SHAIKLEY UP ON HIS PROPOSAL THAT THE STAFF WORK WITH THE  
7    CALIFORNIA COMMUNITY FOUNDATIONS AND ANY OTHER INTERESTED  
8    PARTIES TO TRY TO DETERMINE WHETHER THERE'S A NONPROFIT  
9    SCENARIO THAT COULD WORK, AND IF DR. GARTHWAITE AND MR.  
10   JANSSEN AND OUR TEAM CONCLUDE BEFORE APRIL 7, DID YOU SAY?  
11   APRIL 7 THAT THERE IS A SUFFICIENT GUARANTEE OR ASSURANCE THAT  
12   THIS IS A DOABLE DEAL, HE CAN COME BACK TO US AND WE CAN PULL  
13   THE PLUG ON THE CLOSURE. BUT IN THE MEANTIME, IF THERE IS NONE  
14   AND THE ODDS ARE -- I MEAN, THE ODDS ARE, AT BEST, 50/50 AND  
15   PROBABLY WORSE, IF THE ODDS -- IF IT DOESN'T COME TO PASS,  
16   THEN, YOU KNOW, THEN AT LEAST EVERYBODY KNOWS WHAT COURSE  
17   WE'RE ON. I HOPE TO GOD THAT WE CAN PUT IT TOGETHER, AND I  
18   THINK THIS IS THE PRECISE KIND OF THING THAT SOME OF THE  
19   FOUNDATIONS, ESPECIALLY THE ONES WHO HAVE BEEN NOT-FOR-PROFIT,  
20   MEDICAL INSTITUTIONS WHO HAVE CONVERTED TO FOR-PROFIT MEDICAL  
21   INSTITUTIONS AND HAVE SET ASIDE TRILLIONS OF DOLLARS INTO  
22   THESE FOUNDATIONS, THIS IS PRECISELY THE KIND OF THINGS  
23   TRADITIONAL COSTS, ONE-TIME OR ONE OR TWO OR THREE-YEAR  
24   TRANSITIONAL COSTS, THEY DON'T WANT TO BE OPERATING OUR HEALTH  
25   SYSTEM, AND I AGREE WITH THEM ON THAT, BUT TO GET US FROM A





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1   TRANSITION TO THIS SITUATION TO A NEW SITUATION IS PRECISELY  
2   WHAT THEY'RE THERE FOR, IN MY OPINION. THEY COULD DO THE  
3   GREATEST AMOUNT OF SERVICE TO OUR HEALTH SYSTEM AND ESPECIALLY  
4   TO THE PHYSICALLY CHALLENGED, TODAY'S PHYSICALLY CHALLENGED  
5   AND TOMORROW'S PHYSICALLY CHALLENGED BY PONYING UP, AND IT  
6   WOULDN'T TAKE A LOT OVER A TWO TO THREE YEAR PERIOD TO  
7   TRANSITION IF THERE WAS PROMISE TO DO THAT. I THINK THEY WILL  
8   BE THE BEST JUDGES OF WHETHER THAT'S POSSIBLE. YOU CAN BE THE  
9   JUDGE BASED ON THEIR INPUT ON WHETHER THAT'S POSSIBLE, BUT IN  
10  THE MEANTIME, I THINK WE HAVE TO -- I DON'T THINK WE CAN SEND  
11  ANY OTHER SIGNAL BUT THAT WE HAVE TO STAY ON COURSE TO HAVE A  
12  -- STABILIZE THE HEALTHCARE DELIVERY SYSTEM, AND WHILE I SAY  
13  AGAIN, WE, AS WE AS WE SIT HERE TODAY, DO NOT KNOW WHAT THE  
14  DEAL IS GOING TO BE WITH THE FEDERAL GOVERNMENT. IT MAY BE  
15  UNRAVELING, IT MAY BE RAVELING TOMORROW, BUT IT'S UNRAVELING  
16  TODAY, AND IT'S BEEN THAT WAY FOR THE LAST QUITE A FEW WEEKS  
17  NOW, BACK AND FORTH AND BACK AND FORTH. SO THAT WOULD BE MY  
18  RECOMMENDATION AND --

19

20  **SUP. BURKE, CHAIR:** IS THERE A SECOND?

21

22  **SUP. ANTONOVICH:** I'LL SECOND.

23

24  **SUP. BURKE, CHAIR:** IT'S BEEN MOVED AND SECONDED. BUT FIRST,  
25  MR. KNABE, MAY I ASK A QUESTION? WHEN WE TALK ABOUT THE



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1 NONPROFIT AND CONVERTING IT TO A NONPROFIT, AND THIS IS NOT  
2 UNHEARD OF. AFTER ALL, MOST OF THE HOSPITALS, THE PUBLIC  
3 HOSPITALS IN CALIFORNIA WERE CONVERTED TO COMMUNITY HOSPITALS  
4 SOME 20 YEARS AGO. THAT'S WHY THERE ARE NOT VERY MANY PUBLIC  
5 HOSPITALS IN CALIFORNIA. THE COUNTY OF LOS ANGELES IS UNIQUE  
6 ALONG WITH TWO OR THREE, ABOUT THREE OR FOUR OTHER COUNTIES  
7 OUT OF 52 THAT HAVE PUBLIC HOSPITALS, BUT NOW IN THE WAY THAT  
8 WE'RE LOOKING AT A NONPROFIT, WOULD WE TALK ABOUT A DOWNSIZE,  
9 IS DOWNSIZING A PART OF THAT WHOLE SCENARIO? WOULD THE  
10 NONPROFITS HAVE TO LOOK AT A DOWNSIZE SO THAT OTHER FUNCTIONS  
11 THAT WOULD NOT FALL WITHIN THEIR PURVIEW OR SOMETHING THAT  
12 WOULD BE REVENUE PRODUCING?

13

14 **DR. THOMAS GARTHWAITE:** I UNDERSTAND FROM THE GILL BALZANO  
15 GROUP, WHO HAVE MUCH MORE EXPERIENCE THAN I DO IN TERMS OF  
16 REHAB HOSPITALS, I WOULD BELIEVE THAT THAT'S EXACTLY WHAT THEY  
17 WOULD DO DURING THE NEXT 30 TO 45 DAYS, WOULD BE TO PULL  
18 TOGETHER A BUSINESS PLAN THAT WOULD LOOK VERY SPECIFICALLY --

19

20 **SUP. KNABE:** WHAT WOULD YOU DO THE NEXT 30, 45 DAYS?

21

22 **DR. THOMAS GARTHWAITE:** WORK WITH THEM, BUT WE WOULD ALSO LOOK  
23 AT DIFFERENT SCENARIOS AND TRY TO MAKE SURE THAT ANY MODELS  
24 THAT WE WORKED WITH AS A BRIDGE TO NOT-FOR-PROFIT WOULD BE --  
25 WOULD LEAVE US AT THE RIGHT CONFIGURATION FOR THE NONPROFIT,



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1 WOULD BE -- I MEAN, WE DON'T WANT TO DOWNSIZE AS WE WOULD DO  
2 IT IF THAT DOESN'T LEAVE THE RIGHT EXPERTS IN PLACE TO  
3 MAXIMALLY PROVIDE FOR THE SUCCESS OF A NOT-FOR-PROFIT. SO IT'S  
4 A MATTER OF WORKING THROUGH THOSE DETAILS WITH THOSE  
5 CONSULTANTS AND OUR OWN TEAM.

6

7 **SUP. BURKE, CHAIR:** SUPERVISOR KNABE.

8

9 **SUP. KNABE:** PRETTY MUCH THE IDEA WAS PREDETERMINED GOING IN,  
10 BUT ZEV, IT'S UNFAIR TO COMPARE TODAY'S SITUATION WHAT WE'RE  
11 IN COMPARED TO THE CATHOLIC HEALTHCARE WEST SITUATION A FEW  
12 YEARS AGO. IT'S A TOTALLY DIFFERENT SITUATION. THAT WAS NOT A  
13 MANAGEMENT DECISION MADE BY THE RANCHO FOLKS, THERE WAS A  
14 MANAGEMENT DECISION MADE WAY ABOVE THAT ASKING US THEY THINK  
15 IT MIGHT BE A GOOD DEAL TO SELL IT OFF, SOMEBODY CAME IN WITH  
16 THIS GREAT DEAL ASKING THE COUNTY TO SUBSIDIZE IT, AND WE DUG  
17 THROUGH IT, FOUND OUT THAT THEY WERE ASKING US TO SUBSIDIZE  
18 THEIR PROFIT AND WE WERE ABLE UNCOVER THAT AND STOP THAT WASTE  
19 OF TAXPAYER DOLLARS. THAT HOSPITAL OUT THERE DURING THAT  
20 PROCESS, IN ORDER TO RESPOND TO EVERYTHING ELSE THAT THE  
21 SENIOR MANAGEMENT WAS SAYING AND THAT THE CATHOLIC HEALTHCARE  
22 WEST OFFER PUT ON THE TABLE GUTTED \$19 MILLION IN NET COUNTY  
23 COSTS OUT OF THAT HOSPITAL DURING THAT TRANSITION. THAT WAS A  
24 COMBINATION OF LABOR, THAT WAS A COMBINATION OF MANAGEMENT,  
25 THAT WAS A COMBINATION OF THE DOCTORS AND THE NURSES OUT THERE



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1 RESPONDING TO A SITUATION. THE SAME WAY WHICH I WOULD THINK  
2 THAT THEY WOULD RESPOND SHOULD WE BE ABLE TO -- THE WHOLE  
3 ISSUE THAT BE FLEXIBILITY FROM THE FIGUEROA STREET. SO I THINK  
4 IT'S AN ENTRY THAT THEY HAVE THE PASSION THAT THEY HAVE FOR  
5 THEIR PATIENTS THAT THEY HAVE A TENDENCY TO COME TOGETHER IN  
6 CRITICAL SITUATIONS, AND I THINK IT'S NOT-FOR-PROFIT. I STILL  
7 THINK THERE IS A VALUE IN KEEPING IT GOING. I THINK YOU  
8 DETRACT FROM THE VALUE OF RANCHO TO HELP JACK SHAIKLEY MAKE  
9 HIS TWELVE CALLS WHEN THIS BOARD VOTES FOR CLOSURE YOU AND  
10 SAY, "YEAH, BUT WE SORT OF WANT YOU TO CHECK THIS OUT, AND IF  
11 IT WORKS, IT WORKS, AND IF IT DOESN'T, IT DOESN'T" KIND OF  
12 THING, IT DETRACTS FROM RANCHO AND SEE ABILITY TO GET THE KIND  
13 OF COMMUNITY FOUNDATION DOLLARS THAT WE NEED. [ Applause ]

14

15 **SUP. KNABE:** AND WHEN I SPEAK IN TERMS OF VALUE, I SPEAK OF THE  
16 STAFF AND PATIENTS. THAT'S ALL TOGETHER. BUT TO SORT OF  
17 DISMANTLE THAT IN A VERY SHORT STROKE I THINK TAKES AWAY FROM  
18 THAT, BUT YOU'VE GET A MOTION AND A SECOND. ROLL CALL.

19

20 **SUP. BURKE, CHAIR:** SUPERVISOR ANTONOVICH.

21

22 **SUP. ANTONOVICH:** IT'S VERY IMPORTANT IN ANY TRANSITION THAT WE  
23 CONVERT RANCHO TO A FREESTANDING NONPROFIT FACILITY THAT WE  
24 HAVE THE ABILITY IS TO GENERATE THE REVENUE TO OPERATE THAT  
25 HOSPITAL. THE ESTIMATED SAVINGS RELATED TO THE CLOSING ARE



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1 64.8 MILLION DOLLARS IN FISCAL YEAR 2004 05 AND 70.4 IN  
2 2005/2006. THE MOTION SHALL ALSO INCLUDE THAT HAS THAT  
3 INFORMATION RELATED TO THE ABILITY OF THE NONPROFIT ENTITY TO  
4 GENERATE THE REVENUES NECESSARY TO OFFSET THE NET COUNTY COSTS  
5 ASSOCIATED WITH THE OPENING FOR THE OPERATION OF RANCHO DURING  
6 THE TRANSITION PERIOD AND SUBSEQUENT TO ANY TAKEOVER. WE'RE IN  
7 A CATCH 22 POSITION. THE COUNTY CAN ONLY OPERATE THE HEALTH  
8 FACILITIES ON THE DOLLARS THAT WE HAVE AVAILABLE TO US. WE  
9 DON'T HAVE THE OPPORTUNITY OF GENERATING ADDITIONAL FUNDS  
10 THROUGH DEFICITS SPENDING. WE HAVE TO HAVE A BALANCED BUDGET.  
11 AND AS A RESULT OF THE NEEDS AND THE FAILURE OF THE STATE AND  
12 MONEY TO FOLLOW THE PATIENT AND A LOT OF OTHER ISSUES, WE ARE  
13 HAVING TO HAVE A BUDGET TO MEET THE HEALTH DELIVERY SYSTEM OF  
14 THE COUNTY. UPON THOSE DOLLARS THAT WE HAVE BEFORE US. WE  
15 DON'T HAVE THE ABILITY TO RAID THE GENERAL FUND, WE DON'T HAVE  
16 THE ABILITY TO SHUT DOWN A SHERIFF'S DEPARTMENT OR SHUT DOWN  
17 ALL OF THE LIBRARIES TO SUPPORT THE HEALTHCARE DELIVERY  
18 SYSTEM. WE HAVE TO DO IT ON THE DOLLARS THAT ARE AVAILABLE AND  
19 MAKE THE BEST DECISIONS POSSIBLE. ESTABLISHING PUBLIC/PRIVATE  
20 PARTNERSHIPS IS WHAT WE NEED TO AGGRESSIVELY PURSUE. IT CAN BE  
21 ACCOMPLISHED, IT CAN BE DONE. WE'RE NOT CLOSING THE HOSPITAL.  
22 WE'RE HAVING A DIFFERENT TYPE OF OPERATION OF THAT FACILITY.  
23 AGAIN, IT'S NOT CLOSING THE HOSPITAL, IT'S A DIFFERENT TYPE OF  
24 OPERATION THAT WILL BE OPERATING AT RANCHO PROVIDING THE TYPE  
25 OF SERVICES NECESSARY TO THOSE WHO ARE IN NEED OF THOSE TYPE



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1 OF SERVICES. WE'RE GOING TO AGGRESSIVELY PURSUE PUBLIC/PRIVATE  
2 PARTNERSHIPS. THIS IS GOING TO HELP PROVIDE THE QUALITY CARE  
3 THAT THE PEOPLE HAVE BEEN USED TO AT THAT FACILITY.

4

5 **SUP. KNABE:** IF I UNDERSTOOD THE MOTION, THE MOTION IS CLOSURE.

6

7 **SUP. BURKE, CHAIR:** MY UNDERSTANDING OF THE MOTION IS THIS,  
8 THAT FIRST OF ALL, WE HAVE TO ESTABLISH CREDIBILITY. WE HAVE  
9 SOME SERIOUS PROBLEMS IN WASHINGTON BECAUSE WE HAVE BEEN  
10 REPRESENTING THAT WE WERE GOING TO TAKE CERTAIN ACTION FOR NOW  
11 10 YEARS. WELL, NOT QUITE 10. IT'S SEVEN YEARS. WE SAID THAT  
12 WE WERE GOING TO REDUCE SOME OF OUR INPATIENTS. WE HAVE  
13 REDUCED SOME BEDS, BUT IN WASHINGTON, THEY ARE WAITING TO SEE  
14 IF WE REALLY ARE GOING TO DO ANYTHING AND IF WE WANT TO BE  
15 ABLE TO GET THE MONEY WE NEED TO MAINTAIN THIS SYSTEM, WE'RE  
16 GOING TO HAVE TO SHOW THEM THAT WE ARE MOVING IN SOME WAY. WE  
17 ARE NOT MOVING TO SAY WE'RE CLOSING RANCHO. WHAT WE'RE SAYING  
18 IS SOMETHING THAT WE ALL KNOW HAS TO HAPPEN. WE'RE GOING TO  
19 PROCEED TO CHANGE RANCHO INTO A NONPROFIT HOSPITAL AND  
20 REHABILITATION CENTER. IT WILL MAKE IT POSSIBLE FOR RANCHO TO  
21 TAKE PRIVATE PATIENTS AS WELL AS NON OR GOVERNMENTALLY-  
22 FINANCED PATIENTS. IT WILL OPEN UP A WHOLE NEW REVENUE STREAM  
23 FOR THEM. WE'RE ALSO GOING TO GO OUT TO THE FOUNDATION  
24 COMMUNITY TO GET THEIR ASSISTANCE, AND I BELIEVE WE'RE GOING  
25 TO GET THEIR HELP BECAUSE THEY ARE AWARE OF THE SAME THINGS



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1 THAT WE'VE HEARD TODAY, THAT RANCHO IS NECESSARY. BUT YOU  
2 KNOW, IF WE DON'T SAY THAT THERE IS SOME DATE THAT WE EXPECT  
3 TO DO THIS BY, THE MESSAGE WE'RE SENDING TO WASHINGTON IS WE  
4 REALLY AREN'T PLANNING TO DO ANYTHING. I THINK IT'S VERY  
5 IMPORTANT FOR OUR CREDIBILITY TO MAKE IT VERY CLEAR WE'RE  
6 MOVING, WITH HER GOING TO RECONFIGURE -- WE ARE GOING TO  
7 RECONFIGURE RANCHO, WE ARE GOING TO MAKE THE CHANGES, AND I  
8 KNOW THAT SUPERVISOR MOLINA IS NOT VERY HAPPY ABOUT US  
9 REDUCING THOSE HUNDRED BEDS, BUT AT THE SAME TIME, JUST LIKE  
10 AT MARTIN LUTHER KING, THEY'RE GOING TO HAVE TO HAVE  
11 EFFICIENCIES. WE HAVE TO HAVE SOME CHANGES OR ELSE WE DON'T  
12 EVEN MAKE THE SCENARIO OF WHERE, IF THEY GIVE US FEDERAL  
13 MONEY, WE CAN CONTINUE TO OPERATE. THAT'S ONE OF THE THINGS WE  
14 HAVE TO FACE, UNLESS WE MAKE CUTS, ABOUT \$250 MILLION WORTH,  
15 ALL THE MONEY THEY'RE EVEN TALKING ABOUT IN WASHINGTON, ALL  
16 THE MONEY THAT WE RAISE, BECAUSE THE VOTERS VOTED FOR MEASURE  
17 N, WITH ALL OF THAT, WE STILL CAN'T CONTINUE TO OPERATE UNLESS  
18 WE GO FORWARD AND DO SOMETHING, AND IT'S PAINFUL, IT'S  
19 HORRIBLE, BUT THE REALITY IS, WE'RE GOING TO TRY TO MAINTAIN  
20 SERVICES, WE HAVE TO TRY TO MAINTAIN RANCHO PROVIDING THE  
21 SERVICES IT'S KNOWN FOR AND IT'S BEEN DISTINGUISHED FOR, BUT  
22 WE HAVE TO DO IT UNDER DIFFERENT KIND OF OWNERSHIP AND  
23 OPERATION. WE'LL CALL THE ROLE.

24

25 **SUP. YAROSLAVSKY:** MADAM CHAIR --





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1

2 **SUP. BURKE, CHAIR:** SUPERVISOR MOLINA. I DIDN'T SEE YOU. I  
3 LOOKED OVER THERE BEFORE I CALLED -- STARTED TALKING. I'M  
4 SORRY. YES.

5

6 **SUP. MOLINA:** FIRST OF ALL, IT'S HARD TO FOLLOW THAT. I'M NOT  
7 SURE I TOTALLY AGREE WITH THAT. YOU KNOW, IT'S REALLY  
8 UNFORTUNATE THAT WE'RE AT A POINT WHERE WE ARE AND WE HAVE TO  
9 DO SOMETHING AS PEOPLE SAID IT, YOU KNOW, THAT WE'RE NOT  
10 COMPASSIONATE, THAT WE'RE NOT GOOD SAMARITANS, THAT WE DON'T  
11 UNDERSTAND THE QUALITY OF CARE THERE AND THAT "IT SAVED MY  
12 LIFE", "I'LL LOSE MY LIFE IF IT'S NOT THERE," THAT WE SHOULD  
13 BE ASHAMED, THAT WE SHOULDN'T BE PROUD, THAT BY THE STROKE OF  
14 A PEN WE'RE GOING TO KILL A LOT OF PEOPLE. THERE WERE A LOT OF  
15 HARSH STATEMENTS BUT TRUE STATEMENTS, BUT AT THE SAME TIME, AT  
16 THE SAME TIME, PART OF WHAT I'M -- WHAT IS DIFFICULT HERE IS  
17 THAT AT THE LAST MOMENT, ON THE LAST DAY, WHEN WE'RE GOING TO  
18 MAKE THESE DECISIONS, ALL OF A SUDDEN PEOPLE COME UP WITH THE  
19 BRIGHT IDEA OF HOW TO SOLVE IT. YOU KNOW, IT'S A SHAME --

20

21 **Audience:** [ Mixed Voices ].

22

23 **SUP. BURKE, CHAIR:** WAIT A MINUTE. WAIT A MINUTE. WE'RE GOING  
24 TO HAVE ORDER HERE!

25



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1   **SUP. MOLINA:** IT'S A SHAME THAT THIS HAS ALWAYS BEEN A  
2   POLITICAL HOT POTATO, THE UNINSURED. NOBODY WANTS TO GRAB HOLD  
3   AROUND IT AND REALLY RESOLVE THIS ISSUE. THE REALITY IS THAT  
4   ALL OF THESE PEOPLE DESERVE THE HIGHEST QUALITY OF CARE, AND  
5   THIS COUNTY HAS BEEN BENDING OVER TO PROVIDE IT EVERY WHICH  
6   WAY. WE'VE BEEN CRITICIZED BY THE FEDERAL GOVERNMENT SAYING WE  
7   HAVE AN OLD SYSTEM. WE'VE BEEN CRITICIZED BY THE STATE THAT WE  
8   SPEND AND WASTE MONEY, WE PAY OUR DOCTORS TOO MUCH, WE HAVE TOO  
9   MANY CONTRACTS. EVERYBODY WANTS TO CRITICIZE US, BUT NO ONE  
10   WANTS TO EMBRACE THE MISSION THAT WE HAVE. WE ARE THE LAST  
11   COUNTY I THINK IN CALIFORNIA THAT HAS THE NUMBER OF PUBLIC  
12   HOSPITALS THAT WE HAVE PROBABLY ON AN NATIONAL LEVEL THAT AS A  
13   COMPREHENSIVE SYSTEM. WE ARE PROBABLY THE ONLY FACILITY --  
14   ONLY COUNTY THAT HAS THE KIND OF REHAB FACILITIES THAT PEOPLE  
15   FROM OUT OF THIS STATE COME TO SEE, OUT OF THIS COUNTRY COME  
16   TO PARTICIPATE AND ARE REFERRED TO, AND, YES, IT'S SHAMEFUL  
17   THAT WE HAVE TO DO IT, BUT I GUESS I'M ALSO ASHAMED AT SOME OF  
18   THE PEOPLE THAT HAVEN'T REALIZED THAT WE'VE BEEN ON THIS TRACK  
19   FOR A LONG TIME. IT JUST DIDN'T HAPPEN TODAY. WE DIDN'T GET UP  
20   THIS MORNING AND SAY, "GEE, I'VE GOT TO GO CLOSE RANCHO." DR.  
21   GARTHWAITE DIDN'T JUST WALK IN WITH THAT RECOMMENDATION ALL OF  
22   A SUDDEN. WE'VE BEEN PART OF A LONG PROCESS OF TRYING TO SAVE  
23   AND WE WAIT UNTIL THE LAST MOMENT AND ALL OF US TRYING DO ALL  
24   THAT WE CAN TO NOT HAVE TO MAKE THIS DIFFICULT DECISION. WE  
25   USE OUR -- WHATEVER POLITICAL LEVERAGE WE HAVE, WE TRY



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1 EVERYTHING THAT WE CAN TO DO IT, BUT THE REALITY IS THAT  
2 THERE'S JUST NOT INTEREST IN THE PEOPLE WHO MAKE THE DECISIONS  
3 TO REALLY SAY WHAT'S HERE. WE ARE AT THE END OF IT, JUST LIKE  
4 YOU ARE. YOU KNOW, WHAT WE'RE DOING HERE IS BASICALLY NOT OF  
5 OUR MAKING, JUST LIKE IT ISN'T OF YOUR MAKING. WHEN YOU NEED  
6 THE SERVICE, YOU NEED TO RELY ON THOSE DOCS AND NURSES AND  
7 HOSPITAL TO BE THERE. WHAT HAPPENED TO YOU WAS NOT OF YOUR  
8 MAKING EITHER THAT GOT YOU TO THE SITUATION YOU NEED REHAB  
9 SERVICES, BUT UNFORTUNATELY, WE ARE AT A POSITION WHERE, RIGHT  
10 NOW, THAT IF WE CAN'T DO THIS, THEN THE WHOLE SYSTEM WILL  
11 SINK, UNFORTUNATELY. AND SO WE ARE DOWNSIZING EVERY SINGLE  
12 DAY, AND THERE'S SOME PROSPECTS FROM TIME TO TIME. PROP A WAS  
13 A GOOD EXAMPLE OF HOW THE TAXPAYERS CAME TOGETHER AND WERE  
14 ABLE TO SAY...

15  
16 **Audience:** [ Mixed Voices ]

17  
18 **SUP. MOLINA:** TO SAY THAT WE NEEDED TO SAVE THE SYSTEM IT TOOK  
19 THE COURAGE OF THE VOTERS TO DO IT BUT ALSO TOOK A UNION TO  
20 WORK VERY, VERY HARD TO MAKE THAT ALL HAPPEN. BUT THE REALITY  
21 IS, AND I GOT MY PHONE CALLS YESTERDAY FROM A LOT OF THOSE  
22 LEGISLATORS THAT WEREN'T HERE TODAY BECAUSE I TOLD THEM IF YOU  
23 COME WE'RE GOING TO HAVE TO ASK YOU THE QUESTION AS TO WHAT  
24 YOU'RE DOING TO SAVE THE WHOLE SYSTEM, SO THEY SENT THEIR AAs  
25 TO COME AND REPRESENT THEIR INTERESTS. BUT THE REALITY IS, IS



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1    THEY HAVE THEIR PROBLEMS AS WELL. EVERYBODY'S GOT THEM, AND  
2    EVERYBODY'S BEEN PASSING THE BUCK, AND -- BUT THE REALITY IS  
3    THAT WE'RE THE ONES THAT HAVE TO MAINTAIN THAT SYSTEM, WE HAVE  
4    TO PAY THOSE DOLLARS. WE HIRE THE DOCS, WE HIRE THE NURSES, WE  
5    HIRE THE SYSTEM, AND SO WE'RE THE ONES THAT HAVE TO MAKE THE  
6    DECISION ABOUT CLOSING DOWN. YOU KNOW, I'D LOVE THE  
7    FOUNDATIONS TO DO SOMETHING, BUT I THINK THAT WE HAD  
8    INDEPENDENT AUDITORS THAT WENT THROUGH THAT, THAT LOOKED AT  
9    ALL THE DIFFERENT NUMBERS, IT WOULD BE AN AMAZING THING FOR  
10    SOMEONE TO STEP FORWARD AND BE ABLE TO OPERATE RANCHO AS WE  
11    KNOW IT TODAY OR ANY OF OUR FACILITIES. WE HAVE BEEN DELAYING  
12    WHAT WE ALSO KNOW TO BE THE INEVITABLE, AND THAT IS WE'RE ON  
13    OUR WAY TO CLOSE MANY, MANY HOSPITALS AND MANY MORE CLINICS  
14    THAT ARE GOING TO BE EQUALLY AS PAINFUL IF NOT MORE AND SO ON,  
15    AND RIGHT NOW THERE'S NOT A DISCUSSION IN THE LEGISLATURE  
16    ABOUT WHAT TO DO. I JUST PARTICIPATED IN A CONFERENCE CALL  
17    RIGHT NOW AND ALL IT WAS WAS ON V.L.F., AND THEY ARE NOT  
18    INTERESTED -- AND V.L.F. DOESN'T SAVE THE HOSPITALS. THAT'S  
19    ANOTHER PART OF THE COUNTY. THEY'RE STAKING EVERYTHING ON IT  
20    AND YET AT THE SAME TIME IT DOESN'T HELP WITH THIS KIND OF A  
21    SITUATION. SO THE REALITY IS WE'VE KNOWN SINCE LAST SUMMER  
22    WHAT WE NEEDED TO DO. WE'VE DONE EVERYTHING THAT WE CAN TO NOT  
23    HAVE TO MAKE THIS DECISION. I MEAN, WE COULD PUT ANY WAY WHICH  
24    YOU WANT TO SPIN THIS THING, BUT THE REALITY IS THAT EVEN  
25    UNDER THE RECOMMENDATION THAT MR. -- THAT MR. KNABE MADE AND



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1 THEN REFINED OR AMENDED BY MR. YAROSLAVSKY, I MEAN, WHY DO WE  
2 HAVE TO GO INTO HIGH DRAMA FOR SOMEBODY TO STEP UP AND SAY,  
3 "THE REALITY IS WE CAN'T DO IT UNLESS THERE'S MONEY." THIS HAS  
4 ALWAYS BEEN IN THE EQUATION IN THE MODEL THAT WE HAD TO DO AT  
5 LEAST THIS MUCH, WE HAD TO ELIMINATE RANCHO AND WE HAD TO  
6 ELIMINATE THE HUNDRED BEDS AT L.A. COUNTY U.S.C. THAT'S PART  
7 OF THE SAVINGS IN WHICH THE REST OF THE SYSTEM DRAWS FROM. WE  
8 HAVE OTHER CLOSINGS WE HAVE TO DO IF WE DON'T GET DECISIONS  
9 MADE BY QUOTE THE NEW DEADLINE DATE, JANUARY 31, WHICH I  
10 HADN'T HEARD WASN'T GOING WELL. BUT I KNOW UP IN SACRAMENTO,  
11 THINGS AREN'T GOING WELL AS WELL AS FAR AS THE LEGISLATORS  
12 PUTTING THE FIRE TO THE FEET OF THE GOVERNOR AND TRYING TO GET  
13 SOME ACTION ON THIS. THE REALITY IS WE'RE ON OUR WAY OF MAKING  
14 MANY OF THE SHAMEFUL DECISIONS AND WE'RE LEFT TO MAKE NO  
15 DECISION BUT TO MOVE FORWARD AND CLOSE. WHAT'S AMAZING TO ME  
16 IS THAT EVEN IN THE WORST SCENARIO, WE ARE STILL LEFT WITH  
17 WHAT I'M TOLD ALMOST A THREE-BILLION-DOLLAR HEALTHCARE  
18 PROGRAM, EVEN THOUGH WE'RE NOT GOING TO HAVE ALL OF OUR  
19 HOSPITALS OR REHAB, ALL OF OUR CLINICS. \$3 BILLION. AND THE  
20 MINUTE THAT WE GET THERE, WE HAVE TO START DOWNSIZING SOME  
21 MORE, BECAUSE NOW THERE'S GOING TO BE NEW FUNDS THAT WILL BE  
22 TAKEN AWAY. THE LEGISLATURE PASSED A BILL LAST YEAR THAT  
23 WANTED TO UP THE QUALITY OF CARE FOR EVERY PATIENT. THEY SET  
24 NEW STAFFING RATIOS FOR NURSES. \$38 MILLION DOLLARS IT'S GOING  
25 TO COST. A GREAT BILL. BUT WHERE DOES IT COME FROM? WHERE DOES



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1 THE MONEY COME FROM? IT TELLS YOU WHAT TO DO BUT NOT THE  
2 MONEY, AND SO WE WOULD LOVE TO HAVE IT, BUT WHAT THAT WILL  
3 MEAN FOR US IS THAT WE WILL HAVE TO CLOSE DOWN MORE BEDS TO  
4 MEET THOSE NURSING RATIOS. SO THE REALITY IS WE ARE BEING HIT  
5 FROM EVERY SINGLE SIDE AND THE REALITY IS THAT THEY ARE VERY  
6 SHAMEFUL ACTS. MAYBE ALL OF US CAN CONVINCE OUR CONGRESSIONAL  
7 MEMBERS AND OUR STATE LEGISLATORS. I THINK WE COULD RESOLVE  
8 THIS ISSUE BY DOING ONE THING, AND THAT IS HAVING EVERY  
9 EMPLOYER CARRY HEALTHCARE INSURANCE FOR THE PEOPLE THAT THEY  
10 HIRE. IF THAT WERE THE CASE, THEN WE CAN GET INTO THE  
11 DISCUSSION OF WHAT THE COVERAGE SHOULD BE, BECAUSE EVEN AT  
12 RANCHO LOS AMIGOS, ONE OF THE UNFORTUNATE SITUATIONS, EVEN A  
13 FULL PAY PATIENT WITH ALL THE HEALTHCARE COVERAGE IN THE WORLD  
14 DOESN'T COVER ALL OF THE COST. THEIR INSURANCE -- WE'RE  
15 SUBSIDIZING PRIVATE INSURANCE COMPANIES FOR BEING  
16 IRRESPONSIBLE. THAT'S WHAT'S SO SHAMEFUL ABOUT IT ALL. SO  
17 THERE'S A LOT OF DISCUSSION THAT NEEDS TO GO ON, BUT  
18 UNFORTUNATELY, WHETHER IT BE MR. KNABE'S MOTION OR WHETHER IT  
19 BE MR. YAROSLAVSKY'S MOTION, YOU KNOW, IF, IN FACT, THE  
20 FOUNDATIONS COME IN AND THEY CAN SAVE THAT, I JUST DON'T KNOW  
21 HOW THEY CAN DO IT. I THINK THAT THE QUESTIONS HAVE BEEN  
22 ASKED. I'M WILLING TO, YOU KNOW, WAIT UNTIL THE LAST MINUTE,  
23 BUT TODAY IS THE LAST MINUTE WITH REGARD TO THE DECISION OF  
24 CLOSURE. WE HAVE AN OPPORTUNITY, I'M TOLD BY YOUR RESPONSE,  
25 UNTIL JUNE IN WHICH WE ACTUALLY PHYSICALLY WILL START CLOSING



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1 DOWN, SO IN 45 DAYS, IF THESE MAGICIANS CAN COME UP WITH  
2 SOMETHING, THEN THERE IS VALUE AND WE CAN RESURRECT IT ALL,  
3 BUT THE REALITY IS, AND I AM REALLY -- I'M REALLY DISHEARTENED  
4 BY HAVING TO MAKE THIS DECISION AND UNFORTUNATELY I THINK THAT  
5 A MONTH FROM NOW WE'RE GOING TO BE HEARING FROM DR. GARTHWAITE  
6 ABOUT HOW THINGS DIDN'T GO WELL IN WASHINGTON, D.C., NOTHING  
7 IS HAPPENING UP IN SACRAMENTO, AND NOW WE HAVE TO GO INTO THE  
8 NEXT SCENARIO AND THAT IS TO ELIMINATE HARBOR, BEGIN MOST OF  
9 THE CLOSURES AT M.L.K., ELIMINATE OLIVE VIEW AND MODIFY THAT  
10 AND THEN OF COURSE ELIMINATE ROY BAUM, AND THOSE ARE ALL  
11 HORRIFYING SITUATIONS AND ALL OF A SUDDEN PEOPLE WILL STAND UP  
12 AND SAY, "WELL, WE COULD DO THIS OTHER WAY, WE COULD DO THIS,  
13 WE COULD DO THAT." WE'RE TRYING TO TELL THEM NOW, NOW IS THE  
14 TIME TO GET INTO ACTION, AND SOMEHOW IT ISN'T -- NO ONE IS  
15 LISTENING. I GUESS NOBODY UNDERSTANDS THE KIND OF FISCAL  
16 CONSTRAINTS THAT WE'RE IN UNTIL THEY GET THE PINK SLIPS  
17 THEMSELVES OR UNTIL THAT DOOR IS CLOSED AND YOU NEED  
18 DESPERATELY THAT CARE, AND IT'S UNFORTUNATE THAT WE HAVE TO DO  
19 THAT NOW BECAUSE THERE ARE TOO MANY PEOPLE THAT COULD SAVE US  
20 AND SO MUCH OF IT IS NOT BY GIVING US THEIR MONEY, BUT BY  
21 GIVING US AN OPPORTUNITY TO MAKE -- TO HAVE THE KIND OF  
22 COVERAGE THAT THEY SHOULD HAVE EITHER BY EMPLOYERS DOING IT OR  
23 GIVING US AN OPPORTUNITY TO TAX DRINKS IN THIS COUNTY WHICH  
24 WOULD RAISE MONEY AND SAVE A BIG PART OF THE SYSTEM AS WELL,  
25 BUT SO FAR NOBODY HAS SAID "YES" TO ANY OF THOSE PROPOSALS, SO





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1 WE ARE LEFT WITH TO MAKE A DECISION TODAY AND THAT IS TO MOVE  
2 FORWARD WITH THE RECOMMENDATION AS AMENDED BY THE MOTIONS OF  
3 MR. YAROSLAVSKY AND MR. KNABE.

4

5 **SUP. BURKE, CHAIR:** MR. YAROSLAVSKY? AND THEN MR. KNABE.

6

7 **SUP. YAROSLAVSKY:** I WANTED TO RESPOND TO COMMENTS MADE BY MR.  
8 ANTONOVICH. I WANT TO BE REAL CLEAR. THE MOTION IS TO APPROVE  
9 DR. GARTHWAIT'S RECOMMENDATION FOR CLOSURE. THIS IS NOT A  
10 MOTION TO DELAY CLOSURE AND FIND ANOTHER ALTERNATIVE.

11

12 **SUP. BURKE, CHAIR:** I UNDERSTOOD THAT.

13

14 **SUP. YAROSLAVSKY:** OKAY. ALL RIGHT.

15

16 **SUP. MOLINA:** WAS THAT SECONDED BY MR. KNABE?

17

18 **SUP. KNABE:** NO. SECONDED BY ANTONOVICH. GOOD TRY, GLORIA. GOOD  
19 TRY. [ Laughter ].

20

21 **SUP. YAROSLAVSKY:** MY MOTION IS EXACTLY WHAT YOU DESCRIBED,  
22 WHICH IS GO AHEAD AND MOVE TO CLOSE, AND IF A MAGICIAN IS AT  
23 WORK AND THEY CAN COME BACK AND 60 DAYS OR 70 DAYS TO COME  
24 BACK, THAT WOULD BE GREAT. I THINK THE ODDS OF THAT HAPPENING  
25 ARE LESS THAN 50/50. I THINK FAR LESS THAN 50/50.



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1

2 **SUP. BURKE, CHAIR:** I'M GOING TO CALL ON MR. KNABE. I BELIEVE  
3 IF THERE'S ONE FACILITY AND ONE HOSPITAL IN OUR SYSTEM WHERE  
4 IT HAS A CHANCE FOR THAT TO HAPPEN, IT'S RANCHO. I THINK IT'S  
5 THE ONLY PLACE.

6

7 **SUP. YAROSLAVSKY:** I AGREE. [ Cheers and Applause ].

8

9 **SUP. BURKE, CHAIR:** SO WE HAVE TO --

10

11 **SUP. YAROSLAVSKY:** MADAM CHAIR, I AGREE, I TOTALLY AGREE, BUT I  
12 WANT TO JUST RE-ECHO WHAT -- THAT'S NOT A WORD. I WANT TO ECHO  
13 WHAT MS. MOLINA SAID A MINUTE AGO, WHICH IS THIS PROBLEM  
14 DIDN'T START LAST NIGHT. THIS HAS BEEN SINCE I'VE BEEN HERE,  
15 THIS HOSPITAL'S BEEN ON THE BUBBLE, AND SOMEBODY ASKED ME  
16 YESTERDAY, WHY HASN'T THERE BEEN PRIVATE FUNDRAISING ON THE  
17 LEVEL OF THE CITY OF HOPE OR ON THE LEVEL OF SOME OF THE OTHER  
18 THAT MR. SHAIKLEY DESCRIBED EARLIER. THE ANSWER IS, THEY  
19 DIDN'T NEED IT BECAUSE IT WAS FUNDED THIS WAY, AND BUT FOR  
20 SEVEN YEARS, SIX YEARS, THIS HAS BEEN IN DISCUSSION AND  
21 CERTAINLY IN THE LAST ITERATION, REGARDLESS OF WHAT OUR VIEWS  
22 ARE OR WHAT HAPPENED FIVE, SIX YEARS AGO, IN THE LAST -- SINCE  
23 FEBRUARY, WHEN YOU FIRST CAME ON BOARD, THIS HAS BEEN FRONT  
24 AND CENTER, AND IN EVERY SCENARIO, IN EVERY SCENARIO THAT WE  
25 HAVE DISCUSSED, WHETHER IT'S SCENARIO TWO OR THREE OR XXX,



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1 RANCHO HAS BEEN FRONT AND CENTER FOR CLOSURE ON YOUR  
2 SCENARIOS. SO IT'S NOT LIKE THIS -- NONE OF US LIKE IT, AND  
3 YOU CAN HISS AND YOU CAN BOO AND YOU CAN RIDICULE, THAT'S  
4 FINE, NONE OF US LIKE IT ANY MORE THAN YOU DO AND WE'RE THE  
5 ONES WHO HAVE GOT TO LIVE WITH THE DECISION, BUT THE DECISION  
6 THAT WE'VE GOT TO MAKE --

7

8 **Audience:** [ Mixed Voices ].

9

10 **SUP. YAROSLAVSKY:** THE DECISION WE'VE GOT TO MAKE IS A SYSTEM  
11 WIDE DECISION, IS A SYSTEM WIDE DECISION, IT'S A SOPHIE'S  
12 CHOICE. THAT'S WHAT WE HAVE. WHICH LIFE DO YOU SAVE? AND  
13 THAT'S THE POSITION WE'VE BEEN PUT IN. SO THIS IS NOT  
14 SOMETHING THAT CAME UP LAST NIGHT. IT'S NOT SOMETHING THAT  
15 CAME UP DAY BEFORE YESTERDAY, AND YOU WILL HAVE 60 TO 70 DAYS,  
16 DR. GARTHWAITE, TO EVALUATE WHAT THE POWERS THAT BE IN THE  
17 CHARITABLE COMMUNITY AND ELSEWHERE CAN COME UP WITH, AN IF WE  
18 CAN BE OF ANY HELP, WE WILL. YOU TELL US WHAT YOU NEED FROM  
19 US, BECAUSE I WOULD LIKE TO SEE IT HAPPEN. THANK YOU.

20

21 **SUP. KNABE:** I JUST -- ZEV, YOU DON'T TOTALLY AGREE WITH RANCHO  
22 CAN DO, OTHERWISE YOU'D SUPPORT MY MOTION. BUT OTHER THAN  
23 THAT, I THINK THE FACT IS, UP UNTIL LAST NIGHT AND EARLY THIS  
24 MORNING, SUPERVISOR MOLINA INDICATED WHY ARE THESE LAST-MINUTE  
25 SANDS OF SAVIOR KINDS OF PROGRAMS, IS BECAUSE WE DIDN'T HAVE



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1 THE NUMBERS. WE WERE WORKING ON THE NUMBERS UP UNTIL THIS  
2 MORNING. SO OBVIOUSLY, IT WOULD HAVE BEEN HELPFUL, YOU KNOW,  
3 IF THE BOARD WOULD EVER CONSIDERED IT BUT THE MASSACRE MONDAY  
4 NIGHT BACK IN OCTOBER OBVIOUSLY TOOK THAT OUT OF PLAY BY  
5 EXPEDITING IT BY ALMOST A YEAR. WE GOT 45 DAYS. THAT'S WHAT  
6 THE MOTION SAYS. AND THE MOTION IS NOT BUSINESS AS USUAL. THE  
7 MOTION WAS TO DOWNSIZE AND THE WHOLE PROCESS AND IT WAS  
8 SAVINGS FROM THE DEPARTMENT OF HEALTH SERVICES THIS YEAR AND  
9 NEXT THAT EQUALED THE AMOUNT OF SAVINGS IN THEIR PLAN, AND  
10 THAT WAS THE ISSUE, AND IT WASN'T ANYTHING THAT WAS DEVELOPED  
11 AT THE LAST MINUTE BECAUSE WE COULDN'T GET THE NUMBERS TO PUT  
12 THE WHOLE PROGRAM TOGETHER. SO I KNOW THAT TO AVOID THE  
13 CONFLICT OF BEING CALLED THAT I DON'T KNOW WHAT REALITY IS, I  
14 KNOW WHAT REALITY IS BUT I ALSO KNOW THE REALITY IS THAT  
15 THERE'S A REAL OPPORTUNITY TO SPIN OFF RANCHO TO MAKE IT A  
16 NONPROFIT AND THAT WE SHOULD BE SUPPORTIVE OF THAT EFFORT AS  
17 WE POSSIBLY CAN. I CAN'T -- YOU ALL KNOW WHERE I'M COMING  
18 FROM. I CAN'T VOTE FOR CLOSURE AT A POINT WHERE I STILL THINK  
19 THERE'S OPTIONS AVAILABLE FOR RANCHO. [ Cheers and Applause ].

20

21 **SUP. KNABE:** THE ISSUE ABOUT THESE CONTRACTS, THAT'S BEEN PART  
22 OF THE PROBLEM ON OUR SUBSIDIZING BECAUSE WE DON'T HAVE  
23 CONTRACTORS WITH THE MAJOR PAYERS, AND IT'S BEEN DIFFICULT.  
24 OUR FOLKS THERE WILL TELL YOU THAT. WE HAD OUR OWN PERSONNEL  
25 WITHIN THE COUNTY FAMILY THAT HAD A DIFFICULT TIME GETTING



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1 INTO RANCHO. SO, WITH -- AND FULLY INSURED. SO ANYWAY, I GUESS  
2 A DECISION HAS BEEN MADE, BUT HOPEFULLY EVEN WITHOUT DIRECTION  
3 BECAUSE I WAS VERY CLEAR IN MR. YAROSLAVSKY'S MOTION, AND THE  
4 MOTION WAS FOR CLOSURE, BUT THERE'S NO REAL DIRECTION FOR THE  
5 DEPARTMENT TO COOPERATE WITH SHAIKLEY AND THE FOLKS.

6

7 **SUP. YAROSLAVSKY:** THAT'S NOT TRUE. I JUST GOT THROUGH SAYING  
8 THAT, AND MAYBE WE JUST --

9

10 **SUP. BURKE, CHAIR:** IF YOU ADD YOUR MOTION --

11

12 **SUP. KNABE:** REPLAY THE TAPE.

13

14 **SUP. YAROSLAVSKY:** IT'S VERY CLEAR -- EXCUSE ME. IT WAS VERY,  
15 VERY CLEAR, I MADE THE MOTION, I'M GOING TO SAY IT AGAIN, THAT  
16 MR. -- THAT DR. GARTHWAITE AND MR. JANSSEN BE DIRECTED TO WORK  
17 WITH MR. SHAIKLEY AND ANY OTHER INTERESTED PARTIES -- WRITE  
18 THIS DOWN, VIOLET, BECAUSE -- I SAID IT BEFORE AND I'LL SAY IT  
19 AGAIN, TO WORK WITH ALL INTERESTED PARTIES TO MR. SHAIKLEY AND  
20 ANY INTERESTED PARTIES IN CONVERTING THIS TO A NONPROFIT STAND  
21 ALONE HOSPITAL. PERIOD, OVER AND OUT.

22

23 **SUP. BURKE, CHAIR:** AND I THINK HE ADDED TO DOWNSIZE AND SALE  
24 OF SOME OF THE PROPERTIES. DO YOU ACCEPT THAT?

25



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1    **SUP. YAROSLAVSKY:** I DIDN'T SAY THAT.

2

3    **SUP. BURKE, CHAIR:** YOU DON'T ACCEPT THAT?

4

5    **SUP. YAROSLAVSKY:** I NEVER HEARD IT.

6

7    **SUP. BURKE, CHAIR:** IT'S IN HIS MOTION. I WOULD MOVE THAT --

8

9    **SUP. YAROSLAVSKY:** I DON'T HAVE ANY PROBLEM WITH THAT.

10

11    **SUP. BURKE, CHAIR:** I WOULD MOVE THAT THAT BE AMENDED TO

12    PROVIDE FOR THAT THERE BE --

13

14    **SUP. YAROSLAVSKY:** THAT WHAT, THAT HE EVALUATE ANY SCENARIOS OF

15    DOWNSIZING THAT RESULT IN THE CONCOMITANT AMOUNT OF SAVINGS?

16

17    **SUP. BURKE, CHAIR:** AND ALSO TO SELL OFF SOME OF THE PROPERTY -

18    - SELL OR LEASE PROPERTIES -- IT'S UNDER NUMBER THREE OF HIS

19    MOTION, ACCELERATED DEVELOPMENT -- TO REPORT BACK IN 30 DAYS

20    REGARDING AN ACCELERATED DEVELOPMENT OF UNDER-DEVELOPED LAND

21    ON THE RANCHO CAMPUS WITH REGARDS TO BOTH LEASE/SALE

22    OPPORTUNITIES TO HELP FINANCE OPERATION OF A DOWNSIZED RANCHO.

23

24    **SUP. YAROSLAVSKY:** I'VE GOT A PROBLEM WITH "REPORT BACK IN 30

25    DAYS." I DON'T KNOW WHAT THAT MEANS. IF WE'RE TALKING ABOUT



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1 HIM COMING BACK -- IF HE HAS CONFIDENCE THAT THERE IS A  
2 SOLUTION THAT PUTS -- THAT IS --

3

4 **SUP. ANTONOVICH:** GIVE US WEEKLY UPDATES.

5

6 **SUP. YAROSLAVSKY:** WAIT A SECOND. WHAT MY MOTION WAS, WAS TO  
7 ASK YOU TO WORK WITH THE FOUNDATIONS AND OTHER INTERESTED  
8 PARTIES, IF YOU COME UP WITH A CRITICAL MASS OF FUNDING THAT  
9 CAN SAVE THE SYSTEM ON YOUR FINANCIAL TERMS AS CONTAINED IN  
10 YOUR REPORTS, THEN YOU COME BACK AND REPORT TO US. THAT'S  
11 NUMBER ONE. ON THE ISSUE OF DOWNSIZING, I WOULD DO IT ON THE  
12 SAME BASIS. IF HE CAN WORK WITH THE UNIONS AND THE HOSPITAL  
13 ADMINISTRATION, THAT WILL BE INTERESTING, TO COME UP WITH A  
14 PLAN THAT GETS YOU TO THE SAME PLACE FINANCIALLY AS YOUR  
15 ASSUMPTION THAT KEEPS FAITH WITH THE ASSUMPTIONS WE'VE MADE,  
16 COME BACK AND REPORT TO US. I DON'T WANT TO SCHEDULE A REPORT  
17 IN 30 DAYS OR IN 60 DAYS IF THERE'S NOTHING TO REPORT.

18

19 **SUP. BURKE, CHAIR:** HE CAN REPORT BACK EVERY WEEK. JUST KEEP US  
20 UP TO DATE AS TO WHERE HE'S GOING.

21

22 **SUP. YAROSLAVSKY:** MADAM CHAIR, I WOULD RESPECTFULLY URGE THAT  
23 WE ASK HIM TO REPORT IF HE HAS SOMETHING TO REPORT.

24





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1   **SUP. BURKE, CHAIR:** CERTAINLY, OR THE STATUS OF HIS  
2   NEGOTIATIONS.

3

4   **SUP. YAROSLAVSKY:** IN WRITING.

5

6   **SUP. BURKE, CHAIR:** AND YOU HAVE -- WILL YOU ADD TO YOUR MOTION  
7   THAT HE ALSO LOOK AT THE SALE AND LEASE OF SOME OF THE  
8   UNDEVELOPED PLANS?

9

10   **SUP. YAROSLAVSKY:** YES, AND HE CAN REPORT TO US IN WRITING ON  
11   THAT.

12

13   **SUP. BURKE, CHAIR:** AND I WILL SECOND THAT AMENDMENT.

14

15   **SUP. YAROSLAVSKY:** I DON'T WANT -- JUST TO BE CLEAR, THAT WE  
16   NOT HAVE A SCHEDULED HEARING ON THIS EVERY WEEK OR 30 DAYS  
17   UNLESS THERE'S SOMETHING TO HEAR.

18

19   **SUP. MOLINA:** YOU'RE MISLEADING PEOPLE. BE CLEAR.

20

21   **SUP. YAROSLAVSKY:** I'M TRYING TO BE CLEAR.

22

23   **SUP. MOLINA:** I UNDERSTAND YOU'RE TRYING TO, BUT IT KEEPS  
24   GETTING AMENDED AND I THINK WE'LL BE REVISITING THIS.

25



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1   **SUP. BURKE, CHAIR:** WE'RE NOT GOING TO REVISIT IT.

2

3   **SUP. MOLINA:** WHY CAN'T YOU JUST TURN THE MOTION OVER TO DR.  
4   GARTHWAITE AND SEE IF -- AND TO GET THEM TO START WORKING TO  
5   SEE IF THERE'S SOME RESOLUTION THAT THEY CAN PUT TOGETHER. I  
6   THINK THAT WHEN THEY COME TO THAT, WHETHER THEY DO IT IN 10  
7   DAYS, 22 DAYS OR EVEN 69 DAYS, SINCE THERE'S PLENTY OF TIME,  
8   THAT THEY COULD COME FORWARD BEFORE THEY HAVE TO MOVE. IF YOU  
9   DEFINE IT THAT THEY'RE GOING TO ANALYZE WHETHER THEY CAN SELL  
10   THE PROPERTY, SOMEBODY'S GOING TO COME IN AND SAY "NO" BECAUSE  
11   IF YOU GO TO A DIFFERENT APPRAISER -- I JUST DON'T WANT TO GO  
12   THROUGH THAT. BECAUSE IT'S CREATING A FALSE SENSE OF SECURITY  
13   TO SOME PEOPLE AND I WOULD RATHER DEAL WITH WHAT WE NEED TO DO  
14   AND YET CREATE EVERY OPTION AVAILABLE FOR DR. GARTHWAIT TO  
15   EXPLORE IT WITH MR. SHAIKLEY AND THE FOUNDATION.

16

17   **SUP. BURKE, CHAIR:** WE'LL TAKE IT MOTION AS IT IS, THEN.

18

19   **Audience:** [ Mixed Voices ]

20

21   **SUP. ANTONOVICH:** I THINK SUPERVISOR YAROSLAVSKY'S MOTION DOES  
22   WHAT YOU'RE STATING. WE HAVE A PROPOSAL BEFORE US. WE HAVE TO  
23   FOLLOW THE ACTION AS BEING RECOMMENDED, BUT IN THE MEANTIME,  
24   WE'RE ALSO ENCOURAGING AN OUTREACH PUBLIC/PRIVATE PARTNERSHIP  
25   AND ENCOURAGING A REFORM OF THE CURRENT SYSTEM WITH A UNION



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1 MANAGEMENT DOWNSIZING IF THEY REACH THE DOLLAR AMOUNT THAT WE  
2 NEED TO HAVE TO KEEP THIS MEDICAL SOLVENT. THAT'S THE MOTION.

3

4 **SUP. YAROSLAVSKY:** ON THE REAL ESTATE PIECE, I DON'T UNDERSTAND  
5 THAT -- I DON'T UNDERSTAND WHAT THAT MEANS. CAN YOU JUST  
6 EXPLAIN TO ME WHAT THAT PIECE IS?

7

8 **C.A.O. JANSSEN:** I WOULD JUST LEAVE IT OUT AT THIS POINT.

9

10 **SUP. YAROSLAVSKY:** ALL RIGHT.

11

12 **C.A.O. JANSSEN:** WE WILL TAKE A LOOK AT IT.

13

14 **SUP. BURKE, CHAIR:** YOU'LL LOOK AT IT.

15

16 **C.A.O. JANSSEN:** DON'T PUT IT IN THE MOTION.

17

18 **SUP. KNABE:** IF IT BECOMES A PIECE OF FOUNDATION, YOU KNOW  
19 THEY'RE GOING TO LOOK AT IT.

20

21 **SUP. YAROSLAVSKY:** ALL RIGHT. I MOVE APPROVAL OF THE MOTION AS  
22 REFINED.

23

24 **SUP. BURKE, CHAIR:** IT WAS SECONDED BY ANTONOVICH. CALL THE  
25 ROLL.



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1

2 **CLERK VARONA-LUKENS:** SUPERVISOR MOLINA.

3

4 **SUP. MOLINA:** [ Inaudible ].

5

6 **CLERK VARONA-LUKENS:** APPROVE STAFF RECOMMENDATION FOR CLOSURE  
7 AND INSTRUCT THAT THE DIRECTOR AND C.A.O. TO WORK WITH MR.  
8 SHAIKLEY AND THE CALIFORNIA COMMUNITY FOUNDATION AND OTHER  
9 NONPROFIT FOUNDATIONS TO DETERMINE IF RANCHO CAN TRANSITION TO  
10 A FREESTANDING FACILITY AND REPORT BACK IN 60 TO 70 DAYS.

11

12 **SUP. YAROSLAVSKY:** AND OTHER INTERESTED PARTIES. AND DOWNSIZING  
13 PORTION OF MR. -- THOSE ARE THE TWO PIECES.

14

15 **SUP. MOLINA:** YEA.

16

17 **CLERK VARONA-LUKENS:** SUPERVISOR YAROSLAVSKY.

18

19 **SUP. YAROSLAVSKY:** YEA.

20

21 **CLERK VARONA-LUKENS:** SUPERVISOR KNABE.

22

23 **SUP. KNABE:** NO.

24

25 **CLERK VARONA-LUKENS:** SUPERVISOR ANTONOVICH.



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1

2 **SUP. ANTONOVICH:** YEA.

3

4 **CLERK VARONA-LUKENS:** AND SUPERVISOR BURKE.

5

6 **SUP. BURKE, CHAIR:** YEA.

7

8 **CLERK VARONA-LUKENS:** THE MOTION.

9

10 **Audience:** (BOOING) .

11

12 **SUP. BURKE, CHAIR:** ALL RIGHT. WE'RE GOING TO HAVE ORDER.

13

14 **Audience:** (BOOING CONTINUES) [ Chanting ]

15

16 **SUP. BURKE, CHAIR:** IF ONE ADDITIONAL ADJOURNMENT. JOHN AKREL,  
17 A LONG-TIME MEMBER OF ST. NICHOLAS CHURCH.

18

19 **Audience:** [ Chanting ].

20

21 **SUP. BURKE, CHAIR:** I HAVE AN EMERGENCY MOTION, AND THEN WE'RE  
22 GOING TO -- WE'LL RECESS FOR 10 MINUTES. BUT I HAVE AN  
23 EMERGENCY MOTION.

24

25 **Audience:** [ Chanting ].



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The Los Angeles County Board of Supervisors**

1

2 **SUP. BURKE, CHAIR:** I HAVE AN EMERGENCY MOTION ON 4-S. I'LL  
3 PASS IT OUT.

4

5 **Audience:** [ Chanting ].

6

7 **SUP. BURKE, CHAIR:** I'LL PASS OUT ON 4-S.

8

9 **Audience:** [ Chanting ] KEEP RANCHO OPEN! KEEP RANCHO OPEN!  
10 KEEP RANCHO OPEN!

11

12 **SUP. BURKE, CHAIR:** ON 4-S. AN ISSUE HAS COME UP ON 4-S SINCE  
13 OUR LAST MEETING. I WOULD MOVE THAT WE TAKE UP THIS MOTION AS  
14 AN EMERGENCY.

15

16 **Audience:** [ Chanting ] KEEP RANCHO OPEN! KEEP RANCHO OPEN!  
17 KEEP RANCHO OPEN!

18

19 **SUP. BURKE, CHAIR:** WE NEED ONE MORE.

20

21 **Audience:** [ Chanting ].

22

23 **SUP. BURKE, CHAIR:** AN EMERGENCY -- WE NEED ANOTHER COPY -- WHO  
24 DOESN'T HAVE A COPY?

25



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1 **Audience:** [ Chanting ] KEEP RANCHO OPEN! KEEP RANCHO OPEN!

2 KEEP RANCHO OPEN! KEEP RANCHO OPEN! KEEP RANCHO OPEN.

3

4 **SUP. BURKE, CHAIR:** ZEV DOESN'T HAVE A COPY. WE HAVE AN

5 EMERGENCY MOTION ON 4-S.

6

7 **Audience:** [ Chanting ] KEEP RANCHO OPEN.

8

9 **SUP. BURKE, CHAIR:** YOU KNOW ABOUT IT. OKAY. I MOVE THAT WE

10 TAKE UP THE EMERGENCY THAT AN ITEM HAS COME UP SINCE OUR LAST

11 MEETING AND THERE IS AN UNDERSTANDING OF WHAT OUR POSITION IS

12 ON V.L.F. I MOVE THAT WE TAKE THIS UP AS AN EMERGENCY. DO I

13 HAVE A SECOND? IT'S BEEN MOVED AND SECONDED. WITHOUT

14 OBJECTION, WE'RE TAKING IT UP AS AN EMERGENCY.

15

16 **Audience:** [ Chanting ]

17

18 **SUP. BURKE, CHAIR:** IT'S BEEN MOVED AND SECONDED. ALL RIGHT. I

19 MOVE THAT WE ADOPT THE MOTION.

20

21 **Audience:** [ Chanting ] KEEP RANCHO OPEN!

22

23 **SUP. BURKE, CHAIR:** CALL THE ROLE. CALL THE ROLE.

24





**The Meeting Transcript of  
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1 **Audience:** [ Chanting ] KEEP RANCHO OPEN! KEEP RANCHO OPEN!  
2 KEEP RANCHO OPEN!

3

4 **SUP. BURKE, CHAIR:** CALL THE ROLE.

5

6 **Audience:** (CHANTING CONTINUES)

7

8 **SUP. BURKE, CHAIR:** THERE'S ONE VOTE "NO," IS ANTONOVICH. THE  
9 MOTION IS ADOPTED. WE WILL NOW RECESS FOR 10 MINUTES.

10 SUPERVISOR ANTONOVICH HAS A MOTION.

11

12 **SUP. ANTONOVICH:** ON NOVEMBER 15, THE DEPARTMENT OF HEALTH  
13 SERVICES PROVIDED RECOMMENDATIONS TO THE DEVELOPMENT OF A  
14 HEALTHCARE PACKAGE TO GOVERN THE RANGE OF SERVICES AVAILABLE  
15 TO PATIENTS SEEKING CARE IN D.H.S. FACILITIES. THE DEPARTMENT  
16 PROPOSED STRENGTHENING MANAGEMENT AND TRACKING OF PATIENTS WHO  
17 SEEK TREATMENT FOR CHRONIC AND ONGOING HEALTH NEEDS. MOVE THAT  
18 THE BOARD DIRECT DEPARTMENT TO IMPLEMENT HEALTH COVERAGE AND  
19 PATIENT ELIGIBILITY DETERMINATION RECOMMENDATIONS AS OUTLINED  
20 IN THEIR NOVEMBER 152002 MEMORY TO THE BOARD AND REPORT BACK  
21 TO THE BOARD WITHIN 90 DAYS ON THAT STATUS.

22

23 **SUP. BURKE, CHAIR:** IS THERE A SECOND ON THAT? OKAY. IT'S BEEN  
24 MOVED AND SECONDED. WITHOUT OBJECTION, THE MOTION IS ADOPTED.  
25 WE'LL NOW RECESS FOR 15 MINUTES BEFORE PUBLIC COMMENT.



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2 **Audience:** (CHANTING CONTINUES) KEEP RANCHO OPEN!

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**The Meeting Transcript of  
The Los Angeles County Board of Supervisors**

1    **NOTICE OF ADJOURNMENT OF THE JANUARY 28, 2003 MEETING OF THE**  
2    **BOARD OF SUPERVISORS OF THE COUNTY OF LOS ANGELES TO MONDAY,**  
3    **FEBRUARY 3, 2003 AT 1:00 P.M.**

4

5

6    Pursuant to Section 54955 et seq. of the Government Code of  
7    the State of California and by order of the Board of  
8    Supervisors of the County of Los Angeles, the meeting of the  
9    Board of Supervisors of Tuesday, January 28, 2003, adjourned  
10   to Monday, February 3, 2003 at 1:00 p.m. The Board of  
11   Supervisors will first meet in Closed Session in Room 739 of  
12   the Kenneth Hahn Hall of Administration on Item CS-1 to  
13   consider candidates to the position of Director of Children  
14   and Family Services, pursuant to Government Code Section  
15   54957.

16

17   Following the Closed Session, the Board of Supervisors intends  
18   to meet in open session in Room 381B of the Kenneth Hahn Hall  
19   of Administration to further consider the following items  
20   which were not completed on January 28, 2003:

21

22   2.    Hearing on annexation of territories to County Lighting  
23   Maintenance Districts 1687 and 1697 and to County Lighting  
24   District LLA-1, Unincorporated and Carson Zones (1 and 2), and  
25   to levy and collect assessments within the annexed territories



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1 for street lighting purposes, with a base assessment rate of  
2 \$5 for a single-family residence within County Lighting  
3 Maintenance District 1687 and \$1 for a single-family residence  
4 within County Lighting Maintenance District 1697 for Fiscal  
5 Year 2003-04. NOTE: The hearing was closed on 1-28-03. See  
6 Supporting Document:

7 <http://www2.co.la.ca.us/supdocs/sops2002/sd02-3501.pdf>

8

9 3. Hearing on annexation of subdivision territories to  
10 County Lighting Maintenance District 1687 and County Lighting  
11 District LLA-1, Unincorporated Zone (1, 4 and 5), and to levy  
12 and collect assessments within annexed subdivision territories  
13 for street lighting purposes, with a base annual assessment  
14 rate of \$5 for a single-family home for Fiscal Year 2003-04;  
15 also adoption of Joint Resolution Approving and Accepting the  
16 Exchange of Property Tax Revenues resulting from the  
17 annexation of territories. NOTE: The hearing was closed on 1-  
18 28-03. See Supporting Document:

19 <http://www2.co.la.ca.us/supdocs/sops2002/sd02-3095.PDF>

20

21 31. Opportunity for members of the public to address the  
22 Board on items of interest that are within the subject matter  
23 jurisdiction of the Board.

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